

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)


APPROVED
AND
FILED

1277 AUG 20 PM 1:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000003302 (3)**

1. Corporation Name

J & K INSTALLATION, INC.

Principal Place of Business

**5140 BROOKMEADE DRIVE
SARASOTA FL 34232**

Mailing Address

**5140 BROOKMEADE DRIVE
SARASOTA FL 34232**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

01/12/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0548074

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**ATHA, PAMELA J
5140 BROOKMEADE DRIVE
SARASOTA FL 34232**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	ATHA, JOEL R	
STREET ADDRESS	5140 BROOKMEADE DRIVE	
CITY-ST-ZIP	SARASOTA FL 34232	

TITLE	ST	<input type="checkbox"/> DELETE
NAME	ATHA, PAMELA J	
STREET ADDRESS	5140 BROOKMEADE DRIVE	
CITY-ST-ZIP	SARASOTA FL 34232	

TITLE	V	<input type="checkbox"/> DELETE
NAME	ATHA, KRIS A	
STREET ADDRESS	2825 SAVOY DRIVE	
CITY-ST-ZIP	SARASOTA FL 34232	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

8/14/97

941-377-9323

CR2E034 (4/97)

J & K INSTALLATION INC

5140 BROOKMEADE DRIVE
Sarasota, FL 34232

Phone 941-377-9323
Fax 941-371-7210

August 14, 1997

TO WHOM IT MAY CONCERN;

WE ARE FILING OUR CORPORATE REPORT TODAY. I CALLED THE OFFICE AND EXPLAINED TO THEM THAT WE DID NOT RECEIVE THE FIRST NOTICE FOR THIS FILING AND THEY SAID TO WRITE THIS NOTE AND SEND THE \$165.00 THAT WAS DUE BY 5/01/97.

BEING A NEW COMPANY WE WERE NOT AWARE THAT WE FILED THIS EVERY YEAR. THAT IS WHY WE DID NOT INQUIRE WHEN THE REPORT WAS NOT RECEIVED BY US BEFORE NOW.

IF THERE ARE ANY PROBLEMS PLEASE CALL PAM ATHA AT 941-377-9323.

THANK YOU,

PAM ATHA
J & K INSTALLATION INC