SECAND 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.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600006607 (1)

J & K FINANCIAL SERVICES, INCORPORATED

APPROVED AND FILED

97 AUG -7 AM 10: 04

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place	of Business	M	Mailing Address									
1409 KINGSLEY AVE., STE. 7B ORANGE PARK FL 32073			1409 KINGSLEY AVE., STE. 7B ORANGE PARK FL 32073									
ONANGE PAN	N FL 320/3		UNANGE PARK EL 320/3	,				DO NOT WRITE	IN THIS S	PACE		
1								te Incorporated or Qualified 1/18/1996	3a. Da	te of Last	Report	7
2. Principal Place of Business			2a. Mailing Address				4. FEI	Number			Applied For	\exists
21			26				5	9-3357761			Not Applicable	e
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				1	rtificate of Status Desired		\$8.75	Additional	٦
22			27				5. Cei	rimeate of Status Desired		Fee f	Required	
City & State			City & State				6. Ele	6. Election Campaign Financing \$5.00 May Be				
23			28				Tru	st Fund Contribution		Adde	to Fees	_
Zip	⊢				ntry		1 '	s corporation owes or has pa				
24	25 29 30				Personal Property Tax due June 30. Yes						∐ No	~
	9. Name and Address of Curren	t Hegi	stered Agent		81	Nama		me and Address of New Re	gistered /	gent		\dashv
	RA, KEVIN			['	۱'°	Name	l					Ţ
1409 KINGSLEY AVE., STE. 7B ORANGE PARK FL 32073						Street	Address (P.O.	Box Number is Not Acceptat	le)			╗
												4
					63							
				ŀ	B4	City			FL	85 Zip	Code	1
dd Durayant t	o the provisions of Sections 607.050	2 200 4	CO7 1EDS Florido Ctatut	on the ob	-	- nomes	d corporation of	horito this etatement for the		ahaaaina	ita ragiotoros	,
office or re	egistered agent, or both, in the State on familiar with, and accept the obliga-	of Flor	ida. Such change was a	authorized	Ιbν	the cor	rporation's boar	d of directors. I hereby accep	of the app	ointment a	is registered	•
SIGNATURE -					4							,
12.	Signature, typed or printed name of registered age OFFICERS ANI			13.	Age	nt signature	e required when reins	OITIONS/CHANGES TO OFFICE	DATE EDG AND	DIRECTO	DC INI 12	٦,
TITLE	0	<i>- C/II 1</i> L	DELETE	1,1 111	F		T	ITTO NO/OT PANGES TO OTTE	ZENO AND	Change		<u>, }</u>
NAME	VERA, KEVIN			1.2 NAI			1					
STREET ADDRESS	1409 KINGSLEY AVE., STE. 7	В				ADDRESS						- 8
CITY-ST-ZIP	ORANGE PARK FL 32073	-		1.4 CIT			1					
TITLE	D		DELETE	21 101		1-20	 			Change	Addition	ᆔ
NAME	HERNANDEZ, JEANETTE			2.2 NA								
STREET ADDRESS	1409 KINGSLEY AVE., STE. 7	В		1		ADDRESS	1.					1
CITY-ST-ZIP	ORANGE PARK FL 32073	_		2.4 Ci								
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NAME				3.2 NAI								
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NAME				4. 2 NA			1	3000022 -08/12/ ****16	5 94	10/4	004	
STREET ADDRESS						address	-	~UO/ 14/	7 (T-U	1044-	-UZ4	
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CITY-ST-ZIP TITLE			DELETE	4.4 CIT		1-24	 			Change	Additio	_
NAME			- VECTIVE	5.2 NA								.
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Į.			LJ DILLIE				18181	11		L Change	L ROUND	'
NAME CAREET ARRESTOR				6.2 NAI		ADDOFOS	43.0					-1
STREET ADDRESS				1		ADDRESS						
CITY-ST-ZIP				6.4 CIT	Y-S	1-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 of all attachment with an address.