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FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000034737 (2)

1. Corporation Name

JJK, INC.

Principal Place of Business

Mailing Address

POST OFFICE BOX 90126
LAKELAND FL 33804-0126

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LAKELAND FL 33804-0126

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/18/1996

4. FEI Number

65-0667746

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$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

2. Principal Place of Business

21 Mail to Mail Kids

Suite, Apt. #, etc.

22 # 494

City & State

23 Lakeland FL

Zip

24 33809

Country

25 USA

2a. Mailing Address

26 3800 U.S. Hwy 98 N.

Suite, Apt. #, etc.

27 # 494

City & State

28 LAKELAND FL

Zip

29 33809

Country

30 USA

9. Name and Address of Current Registered Agent

LEBLANC, JENNIFER R
1311 COLUMBUS CIRCLE
LAKELAND FL 33805

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 ☐ DELETE

NAME D
LEBLANC, JENNIFER R
STREET ADDRESS 1311 COLUMBUS CIRCLE
CITY - ST - ZIP LAKELAND FL 33805

TITLE ☐ DELETE

NAME D
GROSSE, KATHY M
STREET ADDRESS 5502 HARBOR DRIVE EAST
CITY - ST - ZIP LAKELAND FL 33809

TITLE ☐ DELETE

NAME D
CAIN, JENNIFER L
STREET ADDRESS 440 HOPKINS STREET
CITY - ST - ZIP LAKELAND FL 33809

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I 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: Jennifer R. LeBlanc

4-16-98

(941) 815-2265

CR2E034 (10/97)