

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUMENT # P96000047566							
1. Corporation Name J.T.K. INVESTMENT SERVICES INC							
Principal Place of Business 1027 SW 7TH STREET BOCA RATON FL 33486				Mailing Address 1027 SW 7TH STREET BOCA RATON FL 33486			
2. Principal Place of Business 21				2a. Mailing Address 26		3. Date Incorporated or Qualified 4/3/96	
Suite, Apt. #, etc. 22				Suite, Apt. #, etc. 27		3a. Date of Last Report	
City & State 23				City & State 28		4. FEI Number 65-0673305	
Zip 24				Country 25		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			
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No							
9. Name and Address of Current Registered Agent WILLIAM L PLATTER 1027 SW 7TH STREET BOCA RATON FL 33486				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  WILLIAM L PLATTER Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE D ☐ DELETE NAME WILLIAM L PLATTER STREET ADDRESS 1027 SW 7TH STREET CITY-ST-ZIP BOCA RATON FL 33486				1.1 TITLE ☐ Change ☐ Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP				2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP				3.1 TITLE ☐ Change ☐ Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP			
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP				4.1 TITLE ☐ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP				5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP				6.1 TITLE ☐ Change ☐ 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.				4000002172404 -05/09/97--01002--043 ***165.00			
SIGNATURE:  WILLIAM L PLATTER, Pres 41-877 (561) 367-7371				SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			