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Secretary of State

04-02-2003 90390 042 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000047566

1. Entity Name

JTK ADVISORY INVESTMENT SERVICES INC

90069009

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
7040 W PALMETTO PARK RD	SAME
Suite, Apt. #, etc.: 4-255	Suite, Apt. #, etc.:
City & State: BOCA RATON, FL	City & State:
Zip: 33433 Country: USA	Zip: Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0673305 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: WILLIAM L PLATTER

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

7040 W PALMETTO PARK RD #4-255

City: BOCA RATON FL Zip Code: 33433

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ 3/1/03

Signature of or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRESIDENT/DIRECTOR
NAME	WILLIAM L PLATTER
STREET ADDRESS	7040 W PALMETTO PK RD #4-255
CITY-ST-ZIP	BOCA RATON, FL 33433

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 3/1/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)