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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000081460

1. Corporation Name

JKA INVESTMENTS, INC.

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90078 049 ***150.00



Mailing Address Principal Place of Business 661 NW 118TH ST 661 NW 118TH ST MIAMI FL 33168 MIAMI FL 33168 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/30/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable -65-0758511 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. П 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country Zip Country Zip 8. This corporation owes the current year Intangible □N₀ Personal Property Tax. 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 ANTHONY, JAMES K Street Address (P.O. Box Number is Not Acceptable) 375 NW 122 ST NORTH MIAMI FL 33168 Zip Code R4 City 85 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ Change Addition □ DELETE 1.1 TITLE TITLE ANTHONY, JAMES K 1.2 NAME NAME 375 N.W. 122 ST. 1.3 STREET ADDRESS STREET ADDRESS NORTH MIAMI FL 33168 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE TITLE 2.1 TITLE anthony, barbara NAME 2.2 NAME - -375 N.W. 122 ST. 2.3 STREET ADDRESS STREET ADDRESS NORTH MIAMI FL 33168 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition (DELETE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

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72.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

Change

Addition

CR2E034 (11/98)