

SECOND 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.)

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PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

97 AUG -8 PM 1:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # P96000095144 (7)

1. Corporation Name  
AJK NELSON, INC.

Principal Place of Business  
10 KEYS COURT  
PENSACOLA FL 32505-7326

Mailing Address  
10 KEYS COURT  
PENSACOLA FL 32505-7326

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/18/1996	3a. Date of Last Report
4. FEI Number 59-3423537	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent NELSON, NADINE 10 KEYS COURT PENSACOLA FL 32505-7326	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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	P/S
STREET ADDRESS		1.3 STREET ADDRESS	NADINE NELSON
CITY-ST-ZIP		1.4 CITY-ST-ZIP	10 KEYS COURT
			PENSACOLA, FL 32505-7326
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	V/T
STREET ADDRESS		2.3 STREET ADDRESS	ALOYSIUS A. NELSON
CITY-ST-ZIP		2.4 CITY-ST-ZIP	10 KEYS COURT
			PENSACOLA, FL 32505-7326
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	500002265175--1
CITY-ST-ZIP		3.4 CITY-ST-ZIP	-08/12/97--01095--006
			***165.00 ***165.00
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE \_\_\_\_\_

CR2E034 (4/97)



Leading The Way  
to Upward Prosperity

AJK NELSON INCORPORATION  
10 KEYS COURT  
PENSACOLA, FLORIDA 32505-7326  
TEL: (904) 433-8737 FAX: (904) 433-2137

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July 29, 1997

FLORIDA DEPARTMENT OF STATE  
ATTN: Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FLORIDA 32314

Dear Madam Secretary,

Recently, I received a Florida Department of State 1997 Profit Corporation Annual Report Packet. It was stamped as being my 2nd Notice. Ma'am, I never received the 1st Notice, therefore, I was unaware that I had to pay for a filing fee which was never explained to me. I am a new business that has been in existence since November 18, 1996. I have been in the process of learning to become a well established incorporation. I am asking if I may be waived the fee for \$165.00 which I enclosed by check. I know if I would have known of such filing fee, I would have immediately mailed it to you.

Please understand that I had no intention of missing the deadline. For future references, I will log in my annual reference book a notation of an annual report fee which will be due each year.

If you have any questions, please feel free to contact me as soon as possible. Thank you!

Very Respectfully,

  
NADINE NELSON  
PRESIDENT