FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Jun 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 P96000104137 (0) DOCUMENT # J&K PAINTING & CLEANING SERVICES, INC. Principal Place of Business Mailing Address 2530 SAM RD. 2530 SAM RD. JACKSONVILLE FL 32216 JACKSONVILLE FL 32216 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1997 Applied For FEI Number 2. Principal Place of Business 2a. Mailing Address 34227 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [] No 24 25 29 30 . Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name LANDRY, KELLY A 2530 SAM RD. 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32216 63 84 City 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. (NC)11 - Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE LANDRY, KELLY A AO. BOX 10952 2530 SAM Rd 1.2 NAME NAME STREET ADDRESS 1.3 STREET ADDRESS 2216 JACKSONVILLE FL 32245-6952 1.4 CITY - ST - ZIP CIIY-SI-X DELETE 2.1 THILE TITLE NAME **2.2 NAME** STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 THILE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS **5 3 STREET ADDRESS** 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 THLE 6.2 NAME

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 receiper 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. Kally A | carday 4-29-98

14. Thereby 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

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP