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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000011911

1. Corporation Name

KJP ENTERPRISES, AIRLINE TECHNICAL PUBLICATIONS CO.

Principal	Place of Business	

Mailing Address

## **FILED** Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90012 032 \*\*\*150.00



1132 S.E. 7TH COURT #106 DANIA FL 33004	1132 S.E. 7TH COURT #106 DANIA FL 33004		DO NOT WRITE IN THI	S SPACE
			<ol> <li>Date Incorporated or Qualified</li> <li>02/05/1997</li> </ol>	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0724858	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
- City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		ountry	This corporation owes the current year I     Personal Property Tax.	ntangible ☐ Yes ☐ No
9. Name and Address of Current Registered Agent			10. Name and Address of New Registere	d Agent
PELLEGRINO. KENNETH J		81 Name		
1132 SE 7TH CT SUITE 106		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
DANIA FL 33004		83		
		84 City	F	L 85 Zip Code
<ol> <li>Pursuant to the provisions of Sections 607. office or registered agent, or both, in the St agent. I am familiar with, and accept the ob</li> </ol>	ate of Florida. Such change was authorize	ed by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its registered ointment as registered

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE:	Registered Agent signature n	required when reinstating) DATE	- ˈ
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	l 12
TITLE	O DELETE	1.1 TITLE		Addition
NAME	PELLEGRINO, KENNETH	1.2 NAME		-
STREET ADDRESS	1132 S.E. 7TH COURT #106	1.3 STREET ADDRESS		ł
CITY-ST-ZIP	DANIA FL 33004	1.4 CITY-ST-ZIP		
TITLE	☐ DELETE	2.1 TITLE	☐ Change	Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2.4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE	Change	Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		1
CITY-ST-ZIP		3.4. CITY-ST-ZIP	,	
TITLE	☐ DELETE	4.1 TITLE	☐ Change	Addition
NAME		4. 2 NAME		ļ
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐	Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		Ì
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE	☐ Change	Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP	•	6.4 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.

SAMPTED ACCURED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR