PROFIT CORPORATION ANNUAL REPORT 1999 .



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000044870**1. Corporation Name

K&J BUILDERS, INC.

Principal Place of Business	į

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90012 004 ***150.00



	Ce of Dusifiess									
13496 S.W. 19 MIAMI FL 3317			S.W. 196 STREET FL 33177							•
							DO NOT WRI	E IN THIS	SPACE	<u> </u>
							3. Date Incorporated or Qualifed		•	
							05/19/1997			
Deineinel F	Place of Business		lailing Address			·	4. FEI Number		1 1 4	polied For
2. Principal F	race of Business		ialling Address							
21		26	VI. 404 000				65-0814405			ot Applicable
Suite, Apt	#, etc.	s	uite, Apt. #, etc.				5. Certificate of Status Desired	m ·	، \$8.75	
22		27					5. Certificate of Status Desired		Fee R	equired
City & Sta	ite ·		ity & State				6. Election Campaign Financing		\$5.00	May Be
23	•	28	•				Trust Fund Contribution			to Fees
Zip	Country	Zi	in	Cou	intry			4		
	_ `	-	iP		y		8. This corporation owes the curr	ent year in	Yes	□No
24	25	29		30	,		Personal Property Tax.			
	9. Name and Address of Curren			•			10. Name and Address of New F	egistered	Agent	
		ا موجدات طاحاتین ا			81	Name	•			.
, WEL	LLER, THOMAS R				82	Stroot Add	dress (P.O. Box Number is Not Accepta	hle)		
65 N	N.W. 16TH STREET				02	Sileet Aud	iless (P.O. Box Number is Not Accepta	uie)		
HON	MESTEAD FL 33030-ND				83					E C S 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2
					"				3.15	超調鐵工
	•				84	City	11		85 Zip	Code
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11. Pursuant	t to the provisions of Sections 607.050	2 and 607.	.1508, Florida Statu	ites, the a	bove	-named cor	poration submits this statement for the	purpose o	changing its	s registered
office or	registered agent, or both, in the State	of Florida.	Such change was a	authorized	d by t	the corporat	ion's board of directors. I hereby accer	t the appo	intment as r	egistered "
agent. r	alli tallillar with, and accept the obliga-	uona or, oc	00000, 110	onda olac	utos.		•			
SIGNATURE	Signature, typed or printed name of registered ager	-1 144- 15	-ti-sht- (NOT)	C: Bosistored	1 4 0001	nimantura raquis	red when reinstating)	DATE		
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12.	OFFICERS AIT	D DINECT	DELETE	13.	T. F.		ADDITIONS/CHANGES TO OF	IUERS A	Change	Addition
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TITLE										I .
•			DELETE	_			·		☐ Change	Addition
			☐ DELETE	2.1 TI	TLE		· · · · · · · · · · · · · · · · · · ·		Change	Addition
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	engana menggan		DELETE	2.1 TI 2.2 N/ 2.3 S1	TLE AME	ADORESS			Change	Addition
STREET ADDRESS	Manager and the second	· · · · · · · · · · · · · · · · · · ·	DELETE	2.1 TI 2.2 N/ 2.3 S1	TLE AME TREET	ADORESS			Change	Addition Addition
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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 of 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.

SIGNATURE