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Secretary of State

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PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000076637

1. Corporation Name
JEKA TRADESHOW CARRIERS, INC.

Principal Place of Business

10705 ROCKET BLVD
UNITS 5 AND 6
ORLANDO FL 32824
US

Mailing Address

10705 ROCKET BLVD
UNITS 5 AND 6
ORLANDO FL 32824
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/28/1997

4. FEI Number

59-3465639

Applied For
Not Applicable

2. Principal Place of Business

21 1429 Central Florida Pkwy
Suite, Apt. #, etc.

2a. Mailing Address

26 P.O. Box 771831
Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22 City & State

23 Orlando FL

27 City & State

28 Orlando FL

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24 Zip Country

25

29 Zip Country

30 32877 Oranqu

8. This corporation owes the current year Intangible
Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

JEKA, DAVID
10705 ROCKET BLVD
UNITS 5 AND 6
ORLANDO FL 32837

10. Name and Address of New Registered Agent

81 Name DAVID T JEKA
82 Street Address (P.O. Box Number is Not Acceptable)
11937 Cheltenham Dr
83 Orlando FL 32824
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.502 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-26-99

12. OFFICERS AND DIRECTORS

TITLE D DELETE
NAME JEKA, DAVID T
STREET ADDRESS 13417 FALCON POINTE DR
CITY-ST-ZIP ORLANDO FL 32837

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT Change Addition
1.2 NAME DAVID T. JEKA
1.3 STREET ADDRESS 11937 Cheltenham Dr
1.4 CITY-ST-ZIP ORLANDO, FL 32824

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-26-99

407-240-7060

CR2E034 (11/98)