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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 21 1998 8:00am Secretary of State

DOCUMENT # P97000101737 (9) GKJJ ENTERPRISES, INC.				
Principal Place of Business Mailing Address				1 (40) (40) (40) (40) (40) (40) (40) (40)
256 BOUGAINVILLEA ST 256 BOUGAINVILLEA			T	
TAVERNIER FL 33070 TAVERNIER FL 33070				DO NOT WRITE IN THIS SPACE
}				3. Date Incorporated or Qualified
				12/01/1997
├ '		2s. Mailing Address		4 EEI Number
21		26		650820473 Applicable
Suite, Apt	t∦, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Section Secti
City & Sta	nte	Cily & State		
	•	28		B. Election Campaign Financing Trust Fund Contribution Added to Fees
Zip	Gountry	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	26	29	30	Personal Property Tax due June 30. 🔲 Yes 🥻 No
<u> </u>	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered Agent
	eth e l, J. Robert		81 Name	
			82 Street Add	dress (P.O. Box Number is Not Acceptable)
į Ki	EY LARGO FL 33037		83	
			B4 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				
	Signature, typed or printed name of registered app OFFICERS AN))) Registered Agont signature requ	
12.	DIFFICERS AN	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	WEBER, GARY R	C prefere	1.2 NAME	· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS	4		1.3 STREET ADDRESS	
CITY-ST-ZIP	TAVERNIER FL 33070		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	<u> </u>		2. 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME PARET ADDRESS			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	 	DELETE	3.4. CHTY-ST-ZIP	Change Addition
NAME	}		4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP	l		4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	☐ Change
NAME			5.2 NAME	20/07
STREET ADDRESS			5.3 STREET ADDRESS	1 94
CITY-ST-ZIP		A.S. 5	54 CITY-ST-ZIP	<u> </u>
TITLE		DELETE	6.1 TITLE	Change Addition
NAME	1		6.2 NAME	200002532962 -05/22/9801024024
STREET ADDRESS			6.3 STREET ADDRESS	***150.00
CITY-ST-ZIP	certify that the information supplied w	ith this filing does not qualify	6.4 CITY-ST-ZIP for the exemption stated in	本本をようし、UU n Section 119.07(3)(i), Fiorida Statutes. I further certify that the information

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 of the

GARY LIBORY

5/4/98 (205)852-2899