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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90086 044 ***150.00

| DOCUMENT # | P97000102611 |
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| A (C) | 1 0 1 0 0 0 1 0 2 0 1 1 |

1. Corporation Name

A.J. & K. REAL ESTATE, INC.

| ļ | | | | | | | | | |
|-------------------------------|---|--|----------------------------|---------------|--|---|------------------|--------------------|---|
| Principal Plac | e of Business | Mailing Address | | | 1 | 1 | .,,, | | *************************************** |
| 901 E LAS OLA STE 203 | AS BLVD | 901 E LAS OLAS BLVD STE 203 | | | | | | | |
| FORT LAUDER | DALE FL 33301 | FORT LAUDERDALE FL 3330 | 1 | | Ì | DO NOT V | WRITE IN THIS | SPACE | |
| US | | US | | | 3 | Date Incorporated or Quali | fed | | |
| [| | | | | | 12/05/1997 | | | |
| <u> </u> | lace of Business | 2a. Mailing Address | | . 5 | , , | FEI Number | | | plied For |
| 21 30 1 Suite, Apt. | E. LAS CLAS BUD | 26 301 E. Las Suite, Apt. #, etc | - EVLAS | CW. | <u>v </u> | 65-0799306 | | | t Applicable |
| 22 | 7 12 Frank | 27 / - | rook | | 5 | . Certifcate of Status Desired | d 🗀 | \$8.75 A | |
| City & Stat | T. LOIDEMPALE FZ | 28 FT. COOPER | iace f | ۶. | . 6 | Election Campaign Financi Trust Fund Contribution | ing 🗆 🐪 | \$5.00 Added to | |
| Zip | Country | Zip | Country | - 6 | 8 | . This corporation owes the | current year Int | | |
| 24 3 3 3 | 30 (₂₅ VS) | 29 33301 3 | 0 0 | <u> </u> | | Personal Property Tax. | | | □N ₀ |
| | 9. Name and Address of Current F | Registered Agent | 81 | Name | 10 | Name and Address of Ne | w Registered | Agent | |
| KFII | LEY, PATRICK G | | 61 | Name | | | | · | |
| | I EAST BROWARD BLVD. | | 82 | Street | Address (| P.O. Box Number is Not Acco | eptable) | | |
| | E 206 | | 83 | | | | | | |
| FOR | T LAUDERDALE FL 33301 | | | | | | | | |
| } | | | 84 | City | | | FL | 85 Ζίρ C | lode |
| 11. Pursuant | to the provisions of Sections 607.0502 a | and 607.1508, Florida Statutes | the above | e-named | corporation | on submits this statement for | the purpose of | changing its | registered |
| office or n | egistered agent, or both, in the State of m familiar with, and accept the obligation | Florida, Such change was authors of Section 607,0505, Florid | horized by la Statutes. | the corpo | oration's b | oard of directors. I hereby ac | cept the appoi | ntment as reg | jistered |
| SIGNATURE | | , | ` . | | | | | | |
| | Signature, typed or printed name of registered agent ar | | egistered Agen | t signature r | | | DATE | | |
| 12. | OFFICERS AND | DELETE | 13. | | | ADDITIONS/CHANGES TO | OFFICERS AN | | |
| TITLE | D Stark Perez, Elizabeth | L.J DELETE | 1.1 TITLE | | | | | Change | ☐ Addition |
| NAME | 901 E LAS OLAS BLVD, STE 203 | 1 | 1.2 NAME | 4000000 | 301 | E. LOS OLOS BU | - 70 | France. | |
| STREET ADDRESS CITY-ST-ZIP | FORT LAUDERDALE FL 33301 | , | 1.3 STREET | | 301 | s. Cas Clas De | <i>w</i> | , | |
| TITLE | D | ☐ DELETÉ | 2.1 TITLE | -21- | | · · · · · · · · · · · · · · · · · · · | | Change | Addition |
| NAME I | PEREZ. JOHN | | 2.2 NAME | l | ł | | | • | _ |
| STREET ADDRESS | 901 E LAS OLAS BLVD, STE 203 | 1 | 2.3 STREET | ADDRESS | 301 | E. LAS OLAS | Bup 7 | I frage | ۵ |
| CITY-ST-ZIP | FORT LAUDERDALE FL 33301 | | 2. 4 CTY-S | T- ZIP | | 5 , 6,0 6 0 | • | • | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | , | | | Change | Addition |
| NAME | - · · · · · · · · · · · · · · · · · · · | was a second and the | 3.2 NAME | ~ | · ~ | · - | | | |
| STREET ADDRESS | | •• | 3.3 STREET | ADORESS | } | , | | | |
| CITY-ST-ZIP | | | 3.4. CITY-S | T-ZIP | ļ | | | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | - | | | | ☐ Change | Addition |
| NAME | | | 4. 2 NAME | | | | | | |
| STREET ADDRESS | | | 4.3 STREET | | [| | | | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 4.4 CITY-ST 5.1 TIFLE | - ZIP | - | | | ☐ Change | [] Addition |
| I NAME | | | 5.1 TITLE 5.2 NAME | | | " | | | |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS I | } | | | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST | | | | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | - | | | , | Change | Addition |

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 pr truetee 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.

6.2 NAME

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1 22 99

(954) 522-0081