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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEFARTMENT OF STATE

Katherine Harris

Secr∈tary of State DIVISION OF CORPORATIONS

DOCUMENT # P9800007171

1, Corporation Name

EEKS, INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90146 031 ***150.00



Principal Place of Business	Mailing Address	· -	1 10011001 115 (818) 18111 50111 68111 58111		
1131 N.E. 42ND COURT	1131 N.E. 42ND COURT				
POMPANO BEACH FL 33064 POMPANO BEACH FL 33064			DO NOT WRITE IN	THIS SPACE	
			3 Date Incorporated or Qualified	ITIIS SEACE	
	_	A	01/22/1998		
2. Principal Place of Business	2a, Mailing Address	ALR	4. FEI N imhar /	ADI:	lied For
21 1P6 8. (ortez	126 6125.6	(RANW FOR	65-08	7 Y 7 Y 7 -	Applicable
Suite, Apt. #, etc. Circle U	Suite, Apt. #, etc.	· CC/ / SOCO	- Carry A A State - Desired	\$8.75 A	dditional
22	27	_	5. Certificate of Status Desired	Fee Re	quired
Otty& State	City & State	10 C []	6. Election Campaign Financing	\$5.00	May Be
23 Margate F	- 28("leanua	<u> </u>	Trust Fund Contribution	Added to	Fees
Zing - 2 Country	A Zip	Country C	8. This corporation owes the current ye		
24 3:300 25 LC	N 29 $\bigcirc\bigcirc\bigcirc\bigcirc\bigcirc\bigcirc$	$\frac{10}{100}$	Personal Property Tax.		□No
9. Name and Address of	Current Registered Agent		10. Name and Address of New Regist	arud Ageitt	
DECISTEDED CORPORATE AC	ENTS INC	81 Name			
REGISTERED CORPORATE AGENTS, INC. 612 S. GREENWOOD AVE.		82 Street Aidr	ress (P.O. Bo:: Number is Not Acceptable)		
CLEARWATER FL 33756					
ULEMINATER FL 33/30		83			
		84 City		85 Zip C	ode
11. Pursuant to the provisions of Sections 6				FL	
SIGNATUF E Signature, typed or printed nome of regist		Registered Agent signature require			
	RS ANI) DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	Change	☐ Addition
Stan House	Pan Killin	1.2 NAME		onunge	
NAME SUOTING	+ Tr. Cicw.	1.3 STREET ADDRESS			
STREET ADDRESS	13 2300f	1.4 CITY-ST-ZIP			
TITLE	DELETE	2.1 TITLE		☐ Change	Addition
NAME		22 NAME		_ `	
STREET ADDRESS		23 STREET ADDRESS			
CITY-ST-ZIP		2.4 CITY-ST-ZIP			
TITLE	☐ DELETE	31 TITLE		☐ Change	Addition
NAME		3.2 NAME			
STREET ADDRE 3S		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY-ST-ZIP	_		
TITLE	☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME		4. 2 NAME			
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			
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	☐ DELETE	61 TITLE		☐ Change	☐ Addition
NAME		6.2 NAME			
STREET ADDRES S		6.3 STREET ADDRESS			
CITY-ST-ZIP		64 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 unfer 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: Crank Shalley 192 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR