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

PROFIT CORPORATION ANNUAL REPORT 1999

HILL, KAREN B

1513 JUNIOR COURT

LEHIGH ACRES FL 33971-2045



9. Name and Address of Current Registered Agent

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90083 045 ***158.75

DOCUMENT # P98000010522

1. Corporation Name

NJKA, INC		
Principal Place of Business	Mailing Address	1198(1991 (18 16:4) (1
1513 JUNIOR COURT LEHIGH ACRES FL 33971-2045	1513 JUNIOR COURT LEHIGH ACRES FL 33971-2045	DON
		3. Date Incorporated or 01/23/1998
2. Principal Place of Business	2a. Mailing Address	4. FEI Number 65-0809004
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status D
City & State	City & State	6. Election Campaign Fi Trust Fund Contribution
Zip Country	Zip Country 29 30	8. This corporation owes Personal Property Ta

	DO NOT WRITE IN THIS	SPAC	E		
	3. Date Incorporated or Qualifed				
	01/23/1998				
	4. FEI Number	$\neg \neg$	Арр	lied For	
	65-0809004	ſ	Not	Applicab	le
	5. Certificate of Status Desired .	-	. 75 A	dditional quired	
3. Date Incorporated 01/23/1998 4. FEI Number 65 - 08090 5. Certificate of Statu 6. Election Campaig Trust Fund Contri 8. This corporation of Personal Property 10. Name and Addres Street Address (P.O. Box Number is Description of the Corporation of the Corpor	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
	This corporation owes the current year into Personal Property Tax.	angible X Ye	: :S	□No	
	10. Name and Address of New Registered	Agent			_
Name					
Street	Address (P.O. Box Number is Not Acceptable)				
City	FL	85	Zip C	ode	
named ne corpo	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appoin	chang ntmen	ing its i t as reg	registered jistered	t
signature n	equired when reinstating) OATE				
	ADDITIONS/CHANGES TO OFFICERS AN	ID DIF	RECTO	RS IN 12	_
		□c	hange	Addi	itior
ADDRESS					
ZìP				□ Add	itia.
		110	hange	[T] Addi	aul

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named office or registered agent, or both, in the State of Florida. Such change was authorized by the corp.

81 Name

82

83 84 City

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 a	policable. (NOTE: Re	gistered Agent signature rec	quired when reinstating)		DATE		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR								
TITLE	D	DELETE	1.1 TITLE				☐ Change	☐ Addition
NAME	HILL, LAURENCE M		1.2 NAME					}
STREET ADDRESS	1513 JUNIOR COURT		1.3 STREET ADDRESS					
CITY-ST-ZIP	LEHIGH ACRES FL 33971-2045		1.4 CITY-ST-ZIP					
TITLE	D	DELETE	2.1 TITLE				☐ Change	Addition
NAME	HILL, KAREN B		2.2 NAME					1
STREET ADDRESS	1513 JUNIOR COURT		2.3 STREET ADDRESS					
CITY-ST-ZIP	LEHIGH ACRES FL 33971-2045	والمهضو المنواد الأساد	2:4 CITY-ST-ZIP					
TITLE		□ DELETE	3,1 TITLE				☐ Change	Addition
NAME			3.2 NAME					1
STREET ADDRESS			3.3 STREET ADDRESS			•		Í
CITY-ST-ZIP	·		3.4. CITY-ST-ZIP					Addition
TITLE		☐ DELETE	4.1 TITLE				☐ Change	[] Aggingu
NAME			4,2 NAME					}
STREET ADDRESS	•		4.3 STREET ADDRESS					•
CITY-ST-ZIP	<u> </u>		4.4 CITY-ST-ZIP				Change	Addition
TITLE		☐ DELETE	5.1 TITLE				☐ Criange	[] Addition
NAME			5.2 NAME					ļ
STREET ADDRESS			5.3 STREET ADDRESS		•			ļ
CITY-ST-ZIP	<u> </u>		5.4 CITY-ST-ZIP				Change	[] Addition
TITLE		☐ DELETE	6.1 TITLE				Change	[_] Addition
NAME			6.2 NAME					,
STREET ADDRESS	· · · ·		6.3 STREET ADDRESS	ii .				ľ
CITY-ST-ZIP	<u>.</u>		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:

| Comparison |

941-561-2221 Dayling Phone #