

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # **P98000059592**

1. Corporation Name

SKJ ENTERPRISES, INC.

Principal Place of Business
**11620 S CLEVELAND AVE
FORT MYERS FL 33907**

Mailing Address
**11620 S CLEVELAND AVE
FORT MYERS FL 33907**

FILED
Sep 02, 1999 8:00 am
Secretary of State

09-02-1999 90007 029 ***550.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/01/1998

4. FEI Number

65-0848081

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

116277 S. TAMiami Trail

2a. Mailing Address

16277 S. Tamiami Trail

Suite, Apt. #, etc.

Unit B

Suite, Apt. #, etc.

Unit B

City & State

FT. Myers FL

City & State

FT. Myers FL

Zip

33908

Country

25

Zip

33908

Country

30

9. Name and Address of Current Registered Agent

**KIKTA, STEVEN D
11620 S CLEVELAND AVE
FORT MYERS FL 33907**

10. Name and Address of New Registered Agent

81 Name

Kikta, Steven D.

82 Street Address (P.O. Box Number is Not Acceptable)

16277 S. Tamiami Trail #B

83

84 City

FT. Myers,

FL

85 Zip Code

33908

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

Steven D. Kikta

Steven D. Kikta

Pres.

8-31-99

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

**D
KIKTA, KENNETH J
211 S SPRING BLVD
TARPO SPRINGS FL 34689**

1.2 TITLE ☐ DELETE

**D
KIKTA, STEVEN D
1557 MACCHESNEY DR
TARPO SPRINGS FL 34689**

1.3 TITLE ☐ DELETE

**D
KIKTA, JANYCE H
211 S SPRING BLVD
TARPO SPRINGS FL 34689**

1.4 TITLE ☐ DELETE

**D
KIKTA, JANYCE H
211 S SPRING BLVD
TARPO SPRINGS FL 34689**

1.5 TITLE ☐ DELETE

**D
KIKTA, JANYCE H
211 S SPRING BLVD
TARPO SPRINGS FL 34689**

1.6 TITLE ☐ DELETE

**D
KIKTA, JANYCE H
211 S SPRING BLVD
TARPO SPRINGS FL 34689**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

4. 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.

SIGNATURE:

Steven D. Kikta

8-31-99

941-466-5501

CR2E034 (5/99)