2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State
05-18-2001 91588 007 ***150.00

A00704444

DOCUMENT # P99000013210

1. Entity Name

J & K ENTERPRISES, INC. OF BREVARD

Principal Place of Business | Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
224 BELLA-COOLA DR	224 BELLA-COOLA DR
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: INDIAN HARBOR BCH, Fl	City & State: INDIAN HARBOR BCH, Fl
Zip: 32937 Country:	Zip: 32937 Country:

4. FEI Number 65-0895505 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JUDY LONG
178 SEA PARK BLVD
SATELLITE BEACH, Fl 32937

7. Name and Address of New Registered Agent

Name KAREN MACEJAK

Street Address (P.O. Box Number Is Not Acceptable)

224 BELLA-COOLA DR

City INDIAN HARBOR BCH FL Zip Code 32937

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Karen Macejak DATE 5-1-01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE PSTD NAME KAREN MACEJAK STREET ADDRESS 224 BELLA-COOLA DR CITY-ST-ZIP INDIAN HARBOR BCH, Fl 32937	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karen Macejak 5-1-01