


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 28, 2006 08:00 A
Secretary of State

DOCUMENT # P99000013210	
1. Entity Name J & K ENTERPRISES, INC. OF BREVARD	

Principal Place of Business 224 BELLA-COOLADR INDIAN HARBOR BEACH, FL 32937	Mailing Address 224 BELLA-COOLADR INDIAN HARBOR BEACH, FL 32937
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DO NOT WRITE IN THIS SPACE

(P99000013210P)

05062006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0895505	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MACEJAK, KAREN
224 BELLA-COOLA DR
INDIAN HARBOR BEACH, FL 32937**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

000000575451
08/29/06-80003-001 150.00

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MACEJAK, KAREN 224 BELLA-COOLA DR INDIAN HARBOR BEACH, FL 32937
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Karen Macejak
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/22/06

Date

3216937733

Daytime Phone #