

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TAMARA B. MATHIAS
Secretary of State
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
AND
FILED

9:05 AM - 1 AM 8:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S14958

(0)

1. Corporation Name

N K J INVESTMENTS, INC.

Principal Place of Business

2032 HILLVIEW ST
SARASOTA FL 34239
US

Mailing Address

2032 HILLVIEW ST
SARASOTA FL 34239
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/27/1990

3a. Date of Last Report

05/01/1994

4. FET Number

65-0239419

Apply 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 has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAMBRECHT, WILLIAM G.
1550 RINGLING BLVD.
SARASOTA FL 34236

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0542 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person changing the registered agent or office or both

Signature of the person accepting the appointment as registered agent

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If any)

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

P
BALLIETT, JOHN W.
2032 HILLVIEW ST
SARASOTA FL

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

☐ Change ☐ Addition

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

ST
POPIELINSKI, JAMES G.
2032 HILLVIEW ST
SARASOTA FL

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

☐ Change ☐ Addition

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

☐ Change ☐ Addition

1. NAME
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1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(5)(b), 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing, or on an attachment with an address.

SIGNATURE:

John W. Balliett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John W. Balliett

4-28-95 813-364-9224