SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V27481

(3)

FILED Sep 16 1997 8:00am Secretary of State

NUJAK	DEVELOPMENT INC.	. (-)			T ARAKI BIRRIK KIBIN IRBIN BARBI KANAL KANA	F BIBNI BIBNI BIBNI BFBH Bhani Bibni Habi
Principal Plac	e of Business	Mailing Address			-	B U B E B U \$ U U U
303 E. PEACHTREE ST. LAKELAND FL 33801 US		1031 W. 14TH STREET LAKELAND FL 33805		DO NOT WRITE	IN THIS SPACE	
					3. Date Incorporated or Qualified	3a. Date of Last Report
					04/06/1992	05/01/1996
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3120296	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	SB.75 Additional Fee Regulred	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country 30		8. This corporation owes or has pa	
24	25 9. Name and Address of Curre		<u> 0 </u>		Personal Property Tax due June 10. Name and Address of New Re	
MEA		in riogistorou Agent	81 N	ame	10. Hallie Bild Addition of Hear No	Bissolog Agent
	IDRICK, FRANK, JR.					
1031 W 14TH STREET LAKELAND FL 33805			82 Street Addr		ss (P.O. Box Number is Not Acceptat	ole)
UNIN	EDANU FE 33003		83			
		1				
			84 C	ity		FL B5 Zip Code
11. Pursuant to the provision of Sections 607 0562 and 007.1508, 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 Forida. 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						9 19 19 1
12.		port and title if appricable (NOTE: I	Registered Agent sig	gnature required	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TAILE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change Addition
NAME	KENDRICK, FRANK, JR.		1.2 NAME			_ •
STREET ADDRESS	1031 W. 14TH STREET		1.3 STREET ADDRESS			
CITY-ST-ZIP	LAKELAND FL		1.4 CHY-ST-ZIP			
TITLE	D	DELETE	21 TITLE			☐ Change ☐ Addition
NAME	KENDRICK, SONJI H.		2.2 NAME			
STREET ADDRESS	1031 W. 14TH STREET		2.3 STREET ADDRESS			
CITY-ST-ZIP	LAKELAND FL		2.4 CITY-ST-ZIP			
TITLE	S	☐ DELETE	3.1 TITLE			Change Addition
NAME	HAMILTON, ROBERT		3.2 NAME			
STREET ADDRESS	1031 W. 14TH STREET		3.3 STREET ADDRESS			
CITY-ST-ZIP	LAKELAND FL 33805		3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE			Change Addition
TITLE						C Sharige C Acquion
NAME STREET ASSESSES			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 C(1Y - S1 - Z(P 6.1 TITLE			☐ Change ☐ Acdition
NAME 54	- <u>1</u>		6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP		/	6.4 CITY-SI-ZIF			
14. I do here!	by certify that the information supplies	ed with this filing does not outlify	for the exempt	ion stated	in Section 119.07(3)(i), Florida Statute	s. I further certify that the

4. I do 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 in the state and annual point 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 certoriation or the receiver or tratify empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 33 if changed, or on in attachment with an address.

CICNATURE.

9/9/97 GUDGG-161