

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 06, 1999 8:00 am  
Secretary of State

05-06-1999 90036 048 \*\*\*158.75



PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V54783**

1. Corporation Name  
**HJK INVESTMENTS, INC.**

Principal Place of Business  
**4391 38TH WAY SOUTH  
ST PETERSBURG FL 33711**

Mailing Address  
**4391 38TH WAY SOUTH  
ST PETERSBURG FL 33711**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**07/28/1992**

4. FEI Number  
**59-3136067**

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 Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 **14563 BROOKRIDGE BL**  
Suite, Apt. #, etc.

22 **BROOKSVILLE, FL**  
City & State

23 **34613** **FL**  
Zip Country

24 **34613** **FL**  
Zip Country

2a. Mailing Address

26 **14563 BROOKRIDGE BL**  
Suite, Apt. #, etc.

27 **BROOKSVILLE, FL**  
City & State

28 **34613** **FL**  
Zip Country

29 **34613** **FL**  
Zip Country

9. Name and Address of Current Registered Agent

**ENGLANDER & FISCHER, P.A.  
5959 CENTRAL AVE  
SUITE 201  
ST. PETERSBURG FL 33710**

10. Name and Address of New Registered Agent

81 Name  
**ENGLANDER & FISCHER, P.A.**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**721 FIRST AVENUE N.**  
83  
84 City  
**ST. PETERSBURG** **FL** 85 Zip Code  
**33731**

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

*[Signature]*

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

(NOTE: Registered agent signature required when reinstating)

**4/29/1999**  
DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE  
NAME **KNUTH, GARY R**  
STREET ADDRESS **4391 38TH WAY SOUTH**  
CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE **STD** ☐ DELETE  
NAME **KNUTH, JO ANNE**  
STREET ADDRESS **4391 38TH WAY SOUTH**  
CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE **D** ☐ DELETE  
NAME **KNUTH, NAOMA F**  
STREET ADDRESS **4391 38TH WAY, SOUTH**  
CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition  
1.2 NAME **KNUTH GARY R.**  
1.3 STREET ADDRESS **14563 BROOKRIDGE BLVD.**  
1.4 CITY-ST-ZIP **BROOKSVILLE, FL. 34613**

2.1 TITLE **STD** ☒ Change ☐ Addition  
2.2 NAME **KNUTH JO ANNE**  
2.3 STREET ADDRESS **14563 BROOKRIDGE BLVD.**  
2.4 CITY-ST-ZIP **BROOKSVILLE, FL. 34613**

3.1 TITLE **D.** ☒ Change ☐ Addition  
3.2 NAME **KNUTH NAOMA F.**  
3.3 STREET ADDRESS **14563 BROOKRIDGE BLVD.**  
3.4 CITY-ST-ZIP **BROOKSVILLE, FL. 34613**

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

14. 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, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**JO ANNE KNUTH**

**4/29/99** **352-597-5111**  
Date Daytime Phone #

CR2E034 (11/98)

0501040