2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 19, 2001 8:00 am
Secretary of State
05-14-2001 90229 019 ***150.00

DOCUMENT # P00000082008

1. Entity Name

KISSIMMEE PINES ENTERPRISES, INC.

Principal Place of Business	Mailing Address
3220 W. OAK ST. KISSIMMEE FL 34741	3220 W. OAK ST. KISSIMMEE FL 34741

[redacted]

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

59-3670284

4. FEI Number ~~[illegible]~~ — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CRAMER, CHARLES W 1420 EDGEWATER DR. ORLANDO FL 32804	Name Street Address (P.O. Box Number Is Not Acceptable) City FL Zip Code

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 ______________________________ DATE
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	D MOTTA, LINCOLN 3220 W. OAK ST. KISSIMMEE FL 34741	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOTTA, MICHAEL 3220 W. OAK ST. KISSIMMEE FL 34741	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/00)

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: [signature] 4/16/01 4078467844
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
Doc # P00000868 - Idoc

Florida Corporate Income/Franchise and Emergency Excise Tax Return

F-1120
R. 01/01
PAGE 1

00000200012310002005037435936702840000 5

Use black ink. Example A - Handwritten Example B - Typed

0 1 2 3 4 5 6 7 8 9 | 0 1 2 3 4 5 6 7 8 9

593670284
FEIN

For calendar year 2000 or tax year
beginning _____, 2000
ending _____
Year

Name
Address Kissimmee Pines Enterprises, Inc.
3220 W Oak St
City/State/ZIP Kissimmee FL 34741-3831

☐ Check here if any changes have been made to name or address

☐ Check here if you do not want DOR to send you a form next year. (*see back of payment coupon)

Dear Sirs:
Enclosed
corrected FEIN #
for corporation

Thank you
Joan Floyd

Attachment
Doc # P00000082008
7/16/80

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 7, 2001

KISSIMMEE PINES ENTERPRISES, INC.
3220 W. OAK ST.
KISSIMMEE, FL 34741

Subject: **KISSIMMEE PINES ENTERPRISES, INC.**

Reference Number: **P00000082008**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling $150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The Federal Employer Identification Number listed in Block 4 appears to be invalid. An FEI number is comprised of nine digits and it is not the same as your Social Security number. Please amend your document accordingly. For more information about the FEI number, please call the Internal Revenue Service at 1-800-829-1040.

TO AVOID THE $400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/RJ
ANNUAL REPORTS SECTION