

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000067987

FILED
Apr 16, 2002 8:00 AM
Secretary of State

Entity Name: KM ENTERPRISES OF SARASOTA, INC.

Current Principal Place of Business:

5682 BEE RIDGE RD
#200
SARASOTA, FL 34233 US

New Principal Place of Business:

Current Mailing Address:

46 NORTH WASHINGTON BLVD. #1
SARASOTA, FL 34236

New Mailing Address:

100 WALLACE AVENUE
SUITE 100
SARASOTA, FL 34237

FEI Number: 65-0616474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEINER, NEVIN A
46 NORTH WASHINGTON BLVD. #1
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

WEINER, NEVIN A
100 WALLACE AVENUE
SUITE 100
SARASOTA, FL 34237 US

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: _____

Electronic Signature of Registered Agent

04/16/2002

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so ().

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVPT () Delete
Name: O'NEIL, MARYROSE
Address: 5682 BEE RIDGE RD
City-St-Zip: SARASOTA, FL 34233

Title: DPS () Delete
Name: O'NEIL, KEVIN
Address: 5682 BEE RIDGE RD
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN O'NEIL

Electronic Signature of Signing Officer or Director

DVPT

04/16/2002

Date