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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600055945 (5)

Apr 21 1998 8:00am Secretary of State

FILED

KENNY	WAGNON, INC.	•	,	L HORINATE HIR INHIT AHRI BAHA RAHA DANI BAHA BAHA	Allah alila tahu berah bile kase
Principal Place	of Pusiners	Mailton Address			
Principal Place of Business Mailing Address 2031 KNITTLE CIRCLE 2031 KNITTLE CIRCLE					
NEW SMYRNA BEACH FL 32168 NEW SMYRNA BEACH FL 32168		FL 32168			
US		US		DO NOT WRITE IN TH	IS SPACE
				 Date Incorporated or Qualified 07/02/1996 	
2. Principal Pla	ac e o f Business	2a. Mairing Address		4. FEI Number	Applied For
21		26		59-3389296	Not Applicable
Suite, Apt #	H, etc.	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		• Clastica Courseia - Firmain	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Žψ	Country	8. This corporation owes or has paid the	
24	25	[29]	30	Personal Property Tax due June 30.	🔀 Yes 🔲 No
WAC	g, Name and Address of Current GNON, WILLIAM K	Hogistered Agent	81 Name	10. Name and Address of New Registers	ed Agent
	1 KNITTLE CIRCLE				
	V SMYRNA BEACH FL 32168		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
			83		
			84 City		. 85 Zip Code
			"	F	LII
office or re agent. Lan	o the provisions of Sections 607,0502 gistered agent or both, in the State (in familiar with, and accept the obliga	² and 607.1508, Florida Statu of Florida: Such change was lions of, Sechon 607.0505, F	ites, the above-named corp authorized by the corporal lorida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE _	THE LINGSHIP CO.				
12.	Signature, typicd or printed name of registers Lays: OFFICERS AND		It : Itegistered Agent signature requi 13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIDECTORO IN 40
TITLE	D	DELETE	1.1 TIPLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	Wagnon, William K		1.2 NAME		
STREET ADDRESS	2031 KNITTLE CIRCLE		13 STREET ADDRESS		
CITY-SI-ZIP	NEW SMYRNA BEACH FL	· · · · · · · · · · · · · · · · · · ·	14 CHY-S1-7IP		
TITLE		[_] DELETE	2.1 7171.1		Change Addition
NAME STREET ADDRESS			2.2 NAME		
CITY-S1-ZIP			2.3 STREET ADDRESS		
TITLE		DLLETE	2. 4 CBY+S1-ZIP 3.1 THE		Change Addition
NAME			3.2 NAMI.		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	3.4. CHY+ST+ZIP		
TITLE		L. I DEFTE	4.1 TITLE		Change Addition
NAME STREET ADDRESS			4. 2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY - S1 - ZIP		
TITLE		DITEIE	5.13fflF		Change Addition
NAME			5.2 NAML		
STREET ADDRESS			5 3 STRELT ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CHY-ST-7IP		
TITLE		DELETE	6 1 11TLE		☐ Change ☐ Addition
NAME			6.2 NAME		

14. Thereby 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 suppliemental 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 13 if changed, or on an attachment with an address.

63 STHEET ADDRESS