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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P96000083600

1. Corporation Name

FILED Jan 26, 1999 8:00am **Secretary of State**

01-26-1999 90012 017 ***150.00



	KS FARM, INC.					
	· ·	Mailing Address			•	
ncipal Place of E		172 SHADY OAKS LANE		ì		
72 SHADY QAKS LANE LORID		LORIDA FL 33857	PRIDA FL 33857		DO NOT WRITE IN THIS SPACE	
DRIDA FL 33857 US				3. Date Incorporated or Qualifed 10/07/1996		
				4. FEI Number	Applied For	
	of Business	2a. Mailing Address		65-0707511	Not Applicable	
Principal Place	Of Business	26			\$8.75 Additional	
	to .	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required	
Suite, Apt. #, e	erc.	27		6. Election Campaign Financing	\$5.00 May Be	
2 01-1-		City & State		Trust Fund Contribution	Added to Fees	
City & State	1.	28		8. This corporation owes the curre	ent year Intangible	
<u> </u>	Country	Zip	Country			
Zip	[as]	29 30	L _	10. Name and Address of New R	Registered Agent	
	9. Name and Address of Curren	t Registered Agent	81 Name			
	9. Realife and Advantage Realife		5 I		ablo)	
ROBERT L BUTLER			82 Street Add	ress (P.O. Box Number is Not Accepta	3016)	
83 213 SILVER CREEK LANE			<u> </u>			
LABIDA	A FL 33857	- .	83	一、一、一、一、一、一、一、一、一、一、一、一、一、一、一、一、一、一、一、	85 Zip Code	
			84 City			
•			G G		surpose of changing its registered	
f. Pursuant to office or reg agent. I am	the provisions of Sections 607.050 jistered agent, or both, in the State familiar with, and accept the obliging	ations of, Section 607.0505, Florid	agistered Agent signature requi	ired when reinstating)	FFICERS AND DIRECTORS IN 12	
11. Pursuant to office or rec agent. I am SIGNATURE		ent and title if applicable. (NOTE: Re	egistered Agent signature requi	ired when reinstating) ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12	
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