

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

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May 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 235966 (9)

1. Corporation Name
KEEN ENTERPRISES INC



Principal Place of Business
4100 W. KENNEDY BLVD
SUITE 113
TAMPA FL 33609
US

Mailing Address
4100 W. KENNEDY BLVD
SUITE 113
TAMPA FL 33609-2243
US

3. Date Incorporated or Qualified 05/02/1960
3a. Date of Last Report 03/11/1996

2. Principal Place of Business
21 5094 NW 50th Ct
Suite, Apt. #, etc.

2a. Mailing Address
26 5094 NW 50th Ct
Suite, Apt. #, etc.

4. FEI Number 59-0910124
Applied For Not Applicable

22 City & State
23 Coconut CRK FL

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

24 33073 25 B Broward
26 Coconut CRK FL
27 33073 28 B Broward

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
KAPPIS, STANLEY N.
4100 W. KENNEDY BLVD., SUITE 113
TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name Stanley N. KAPPIS
82 Street Address (P.O. Box Number is Not Acceptable) 5094 NW 50th Ct
83
84 City Coconut CRK FL 85 Zip Code 33073

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 *Stanley N. Kappis* (STAN KAPPIS) 4-28-97
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PSTD	<input type="checkbox"/> DELETE
NAME	KAPPIS, STANLEY	
STREET ADDRESS	4100 W. KENNEDY BLVD #113	
CITY-ST-ZIP	TAMPA FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	KAPPIS, ANITA	
STREET ADDRESS	2816 MORRISON AVENUE	
CITY-ST-ZIP	TAMPA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	5094 NW 50th Ct
1.3 STREET ADDRESS	COCONUT CRK FL 33073
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE: *Stanley N. Kappis* Stan KAPPIS Pres (800) 326 4014 (ext 140)
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)