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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Mar 11 1997 8:00am

Secretary of State

904 744 2055

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

**SIGNATURE:** 

423327

(6)

## KIKLO CORPORATION

Principal Pla	ace of Business	Mailing Address				
5403 SANDERS RD JACKSONVILLE FL 32277			JACKSONVILLE FL 32277-1376			
US		US			3. Date Incorporated or Qualified	3s. Date of Last Report
					04/12/1973	03/15/1996
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-1453400	Not Applicable
Suite Apt # etc:		<b>⊢</b> ¬ ' '	Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	
23]		28	······································		Trust Fund Contribution	\$5.00 May Be Added to Fees
Žφ	Country	Zip			8. This corporation has liability for in	
24			30		Florida Statutes	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Reg	Istered Agent
MI	EGAS, NICK A.		81	Name		
	103 SANDERS ROAD		82 Street Addre		lress (P.O. Box Number is Not Acceptabl	e)
JA	CKSONVILLE FL 3 <del>2211</del>		83			<del> </del>
			0.0		·	
		E.	84	City		FL 85 Zip Code 7
11. Pursuar	it to the provisions of Sections 607 050	02 and 607, 1508, Florida Statu	utes, the abov	l e-named cor	poration submits this statement for the pu	urpose of changing its registered
office or	r registered agent, or both, in the State am familiar with, and accept the oblig	of Floridal Such change was	authorized b	y the corpora	ation's board of directors. I hereby accep-	the appointment as registered
4.		ations of, accitor cor.coos, i	onda olalole	J.		
SIGNATURE	bigs story type for penned needs to disting the	ent and title if applicable (NC	OTE: Registered Ag	ent signature requ	ured when re-estating)	DATE
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	
10.6	PD	☐ DELETE	1.1 TITLE			Change Addition
NAME	CARANTZA, GEORGE		12 NAME			
STREET ADDRESS	1948 HILLTOP BLVD.			ADDRESS		
CHY-ST-ZIP	JACKSONVILLE FL		1.4 CITY - 1 2 1 TITLE	ST-ZIP		☐ Change ☐ Addition
TITLE	U		2.2 NAME			El cumildo El vocacion
NAM?	FELOS, JERRY G.			ADDOLCC		
STREET ADDRESS	6412 AVA DRIVE		2 4 CITY-	ADDRESS		
CHY-ST ZIP TITUE	JACKSONVILLE FL DELETE		3.1 TITLE	31 "ZIF	☐ Change ☐ Addition	
NAM*	STD LEGAS, NICK A.		3.2 NAME	3.2 NAME		<b></b>
STREET ADDRESS	5403 SANDERS ROAD		3.3 STREET ADDRESS			
CITY ST-20P	JACKSONVILLE FL.		3.4. CITY -			
TIPLE	VD	DELETE 4.1 I				Change Addition
NAM*	CAKMIS, WILLIAM J.		4. 2 NAME	4. 2 NAME		
SCREET ADDRESS			4.3 STREE	ADDRESS		
C(1Y-\$1-Z(P	JACKSONVILLE FL		4.4 CITY -	ST - ZIP		
70115	VD DELETE 5		5.1 TITLE			☐ Change ☐ Addition
NAM!	TRIZONIS, VULA		5.2 NAME			
STREET ADDF/S1	שוו הוא ווסרווהאיום כדעד			ADDRESS		
CHY-S1-ZIP TILLE	JACKSONVILLE FL DELETE		5.4 CITY - 1 6.1 TITLE	ST-ZIP		Change Addition
NAVE	<u>ן</u> טבנדונ		6.2 NAME			E otwings E resolution
STREET ADDRESS				ADDRESS		
CHY-S1-ZIP	`		6.4 CITY-			
<b>14.</b> Ldo her	reby certify that the information supplic	ed with this filing does not qua	lify for the ex	emption state	ed in Section 119.07(3)(i), Florida Statutes	I further certify that the
Lam an	tion indicated on this annual report or officer or director of the corporation o s in Block 12 or Block 13 if changed, c	r the receiver or trustee empo	wered to exec	urate and tha oute this repo	at my signature shall have the same legal ort as required by Chapter 607, Florida St	effect as it made under oath; that atutes; and that my name