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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

425625

(1)

FILED May 13 1998 8:00am Secretary of State

KAHLIN	IK, INC.						2 102011 81815 11215 BINE BINE BINE (1081 BINE BIRE BIRE BIRE BIRE BIRE BIRE BIRE BIR	
Principal Place	e of Business	Mailing Add	dress					
2005 BEDFOR		2005 BEDFORD DRIVE						
LAKE PARK FL 33403		LAKE PARK FL 33403					DO NOT WRITE IN THIS SPACE	
US		U\$					3. Date Incorporated or Qualified	\neg
							05/14/1973	
2. Principal PI	ace of Business	2a. Mailing Address					4. FEI Number Applied For	\dashv
21		26					59-1556859 Not Applicate	ıle l
Suite, Apt.	#, elc.	Suite, Apt. #, etc.					SR 75 Additional	
22		27					5. Certificate of Status Desired Fee Required	
City & State		City & State				\\	6. Election Campaign Financing \$5.00 May Be	
23		28					Trust Fund Contribution Added to Fees	_
Zip	Country	Zip		Countr			8. This corporation owes or has paid the current year Intangible	
24	[25]	[29]		30			Personal Property Tax due June 30. Yes No	_
	g, Name and Address of Currer	it Hegistered Ag	Registered Agent			Name	10. Name and Address of New Registered Agent	
GUTMAN, HARRY V.				ľ	31	INATIO		
	05 B EDFORD DRIVE KE P ARK FL 33403		Ē	32	Street Addre	s (P.O. Box Number is Not Acceptable)		
LAI	NE PARK FL 33403			ā	33			괵
				Ľ				
				8	34	City	FL 85 Zip Code	
11. Pursuant t	o the provisions of Sections 607,050	02 and 607.1508.	Florida Statute	s, the abo	 DV0-I	named corpo		-d
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.								
	in terminal with, and accept the orang	ations of occion	001.0000,110	inda Siaidi	103.			
SIGNATURE	Signature, typed or prioted runne of regularies age	al and the if apple able	(NOTE	: Registered /	Agent	signature required	d when reinstating) DATE	-
12.		D DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTO DELETE			1.1 TITLE			Change Additi	on
NAME	GUTMAN, HARRY, V.				1.2 NAME			- 1
STREET ADDRESS	2005 BEDFORD DRIVE LAKE PARK FL			1.3 STREET ADDRESS		DDRESS		1
CITY-ST-ZIP	SD SD		DELETE		1 4 CITY-ST-ZIP		The Additional Property of the Additional Proper	\dashv
TITLE	GUTMAN, LISA	L] Utitit	TE 21 TITLE 22 NAME			☐ Change ☐ Additi	511
NAME	25501 E 99TH STREET				NAME STREET ADDRESS			- 1
STREET ADDRESS	LEE'S SUMMIT MO							
CITY-ST-ZIP TITLE	DEC 0 00mmin mo	- +	DELETE		2 4 CITY-ST-ZIP 31 TITLE		☐ Change ☐ Additi	on
NAME				3.2 NAM				-
STREET ADDRESS				3.3 STRE		DDRESS	•	
CITY-ST-ZIP				3.4. CITY				- 1
TITLE		Τ	DELETÉ	4.1 TITL			Change Additi	on
NAME				4. 2 NAN	ΛE		700002526127	-
STREET ADDRESS				4.3 \$TRE	EET AC	DDRESS	700002526127 -0\$/15/9801105045	
CITY-ST-ZIP				4.4 City	'-ST-	ZIP	***150.00	-
TITLE		L	DELETE	5.1 TITL	E		Change Additi	on
NAME				5.2 NAM	te.		105/12	
STREET ADDRESS				5.3 STRE	EET AD	DDRESS	111/1/13	
CITY-ST-ZIP				5.4 City	'- SI -	7IP		
TITLE	_		DELETE	6.1 TiTL	E		Change Additi	na
NAME				6.2 NAM	1E			
STREET ADDRESS				6.3 STRE	EET AE	DDRESS		
CITY-ST-ZIP				6.4 CiTY				
14. I hereby c	errov that the jutormation supplied w	ato this tiling does	s not qualify fo	r the exen	nntic	on stated in S	Section 119.07(3)(i), Florida Statutes, I further certify that the information	മ

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 supplied ental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation of the receiver of trustee Ampowered 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 by the articular statutes.

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