## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Morthan:

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

576362

(8)

C K	PRODUCTS, INC.	• • •		) 1881A1 ANNE JOHER ANDE HINA	Alian day aday aday aday arah alah bolu alah day
Principal Plac	e of Business	Mailing Address			
1940 N.W. 18TH ST. POMPANO BCH. FL 33069		1940 N.W. 18TH ST. POMPANO BCH. FL 33069			
				3. Date Incorporated or Qualified 06/21/1978	3a. Date of Last Report 02/27/1995
21 Principal P	face of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #. etc.		59-1847513	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional
City & State		Oity & State		6. Election Campaign Financing	Fee Required
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Z <sub>1</sub> ,	Country	8. This corporation has liability for	
24	9. Name and Address of Curren	29	30	Florida Statutes 🔲 Yes	s □No
	3. Maine and Address of Curren	i Registered Agent	81 Name	10. Name and Address of New F	legistered Agent
KENN	EDY CHARLES E. JR		81 Name		
12717	NW 19TH MANOR		82 Street A	Address (P.O. Box Number is Not Acceptat	ple)
CORAL SPRINGS FL 33071			83		
					,
•			84 City	· · · · · · · · · · · · · · · · · · ·	FL 85 Zip Code
or register familiar will SIGNATURE	o the provisions of Sections 607.0502 ed agent, or both, in the State of Florid h, and accept the obligations of Secti-	and 607.1508, Florida Statute Fr. Such change was authorizi on 607.0505, Florida Statutes	es, the above named co ed by the corporation's t	poration submits this statement for the pur locard of directors. Thereby accept the app	· ·
	Standard hypotherican managers of regulations appears	and the Paper are	II. Projetovil Agori supra ve vo	യത്തി യില് പരസംഗ്രസ	LiATE
12.	OFFICERS AND PST	DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE	KENNEDY, JR. C E.	☐ DELLE IE	1 1 TIFLE	Secretary	Change Addition
NAMÉ CTUCK I ANDOSOS	12717 NW 19TH MANOR		1.2 NAME	Tonnie Jacks 8251 SW 7th ct	_
STREET ADDRESS CITY-ST-ZIP	CORAL SPRINGS FL		1.3 STHEET ADDRESS	8251 SW 7th Ct	
TITLE	T T T T T T T T T T T T T T T T T T T	CZ GUTT	14 C-Tr - ST ZiP	N. Laudardale, FL =	33068
NAME	KENNEDY, ELVA S	DELETE	2.1 11166	,	Change Addition
STREET ADORESS	9779 NW 3RD MANOR		2 2 NAME		
CITY - ST - ZIP	CORAL SPRINGS FL		2.3 STREET ADDRESS		
TITLE		DELETE	2.4 CITY - S* - Z:F* 3.1 T:/ LE		
NAME			3 2 NAME		Change Addition
			3.3 STHEET ADDRESS		
CHY-ST ZIP			3.4 CITY - 5" - ZIP		
TITLE		DELETE	4 1 TITLE		Change
NAME			4.2 NAME		☐ Change ☐ Addition
STREET ADDRESS			4.3 STHEFT ADDRESS		
CITY-ST-ZIF			4.4 CHY - \$1 - ZIP		
TITLE		☐ DECETE	5 1 DITUE		Change Addition
NAME STREET LODGESS			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY - ST - ZIP TITLE			5.4 CITY - \$1 - ZIP		
NAME		☐ DELETE	6 THE		Change Addition
STREET ADDRESS			6.2 NAME		
CITY-ST-ZIP			63 STREET ADDRESS		
4			6.4 City - SF - 2iF		

6.4 CHY-SF-ZIF

14. I do hereby certify that the information supplied with this filing is valuntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florido 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 appears in Block 12 or Block 13 if phanged, or on an attractment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR PRINCETOR