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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # 646129

(7)

KE CONSTRUCTION INC

KP CON					
Principal Place	of Business	Mailing Address			
1501 S.W. 73RD AVE. PLANTATION FL 33317  1501 S.W. 73RD AVE. PLANTATION FL 33317-492					
			•	Date Incorporated or Qualified     11/26/1979	3a. Date of Last Report 04/24/1996
2. Principal Pla	ace of Business	2s. Mailing Address		4. FEI Number	Applied For
21		26		59-1957580	Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	)	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζιρ <b>24</b>	Country 25	Zip	Country 30	This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes \(\sum \text{No}\)
<u> </u>	9. Name and Address of Curre			10. Name and Address of New Reg	
	LINI, CAROLYN S.		81 Name		
	I S.W. 73RD AVE. NTATION FL 33317		82 Street Add	ress (P.O. Box Number is Not Acceptab	(e)
r DN	MANORIE SOOT		83		,
			84 City		FL 85 Zip Code
SIGNATURE	Signature: Typed or printed name of registered as	gent and tice if applicable (NOTE:	Registered Agent signature requ		DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
1111.1	SD SACURAL CAROLIVA	DELETE	1.1 TITLE		C cusufia C vonnou
NAME.	PAOLINI, CAROLYN 1501 SW 73RD AVE		1.2 NAME	v	
STREET ADDRESS	PLANTATION, FL 00000		1.3 STREET ADDRESS		
CITY - \$1 - ZIP TITLE	PTD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	PAOLINI, MICHAEL		22 NAME		
STREET ADDRESS	1501 SW 73RD AVE		2.3 STREET ADDRESS		
CITY - S1 - ZIF	PLANTATION, FL 00000		2. 4 CITY-ST-ZIP	••	
TILE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CiTY - ST - ZiP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY- ST-ZIP			4.4 CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·
Title		☐ DELETE	5.1 TITLE		. Change L Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZiP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6 2 NAME		

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.

MICHAEL PAOLINI

PRESIDENT

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

7 APRIL '97 954 792-4273

**FILED** 

Apr 17 1997 8:00am

Secretary of State