Mailing Address

NAPLES FL 34102

SUITE 200

1020 GOODLETTE RD N.

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F85316

1. Corporation Name

Principal Place of Business

1020 GOODLETTE RD N

NAPLES FL (14102

SUITE 200

KRIEK ENTERPRISES, INC.

						06/07	//1982					
2. Principal Place of Business		2a. Mailing Address			4. FEI Nu nber					Apr	ied For	
		26	26			52-12	52-1226721				Not	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5 0-415-	to at Status Desired			\$8.	.75 A	c ditional
2		27	27			5, Certific	nte of Status Desired			F	ee Red	juired
- City & Stat	9	City & State				6. Electio	n Campaign Financing	F-1		\$5	.00	May Be
:3		28	28			Trust F	and Contribution			Ac	ided to	Fees
Zip				Country		8. This co	rporation owes the cur	rent year	- Intar	ngible	;	
4	25 29		30			I	al Property Tax.	•		[V Ye:		[]No
	9. Name and Address of Curre		_ 13	Γ		10. Name	and Address of New I	Register	Ats	gent		
				81	Name							
KRIEK, JOHAN C					Chanal A	ddrana (D.O. Pay	Number is Not Accept	able)				
2740	70TH ST SW		82 Street Ad			daress (P.U. Bo)	Number is Not Accept	aule)				
NA.P	LES FL 34105			83						-		
										,		
				84	City				: 1	85	Zıp C	.ode
	to the provisions of Sections 607.05	500 COZ 4500 Florido Cha	the e		nomed o	a maration submi	to this statement for the	DUFDOSA	_ <u>=</u> _	bangi	na its	rogistered
office or r	egistered agent, or both, in the Stat	e o Florida. Such change was	authorized	j by '	the corpor	ation's board of	cirectors. I hereby acce	pt the ap	ρ sint	ment	as reç	jistered
agent. ⊢a	m familiar with, and accept the obliq	gations of, Section 607.0505, F	krida Stat	utes.	•							
SIGNATURE												
	Signature, typed or printed nai te of registered a	<u> </u>		Agen	t signature rec	u red when reinstating)	NS/CHANGES TO OF	DATE	/. NIC) DIB	ECTO	ES IN 12
12.	DP DPFICERS A	ANE DIRECTORS DELETE	13.	пс		AUUITI	INS/CHANGES TO OF	TICENS		☐ Ch		Addition
TITLE	-	□ DECETE									ungo	<u></u>
NAME	KRIEK, JOHAN		1.2 N									
STREET ADDRESS	2760 70TH ST SW				ADDRESS							
CITY-ST-ZIP	NAPLES FL			ITY-ST	r-ZIP	_			- —	☐ Ch		Addition
TITLE	DVS	☐ DELETE	2.1 TI	TLE							ange	☐ YOUNON
NAME	KRIEK, TISH		22 N	AME								
STREET ADDRESS			2.3 S	TREET	ADDRESS							
CITY-ST-ZIP	NAPLES FL		2.40	ITY-S	T-ZIP							
TITLE		☐ DELETE	3.1 T	πE						☐ Ch	ange	Addition
NAME			3.2 N	AME	Į.							
STREET ADDRESS			3.3 S	TREET	ADDRESS							
CITY-ST-ZIP			3.4. 0	ITY-S	T-ZIP							
TITLE		☐ DELETE	4.1 T	TLE						Cr	nange	☐ Addition
NAME			4.21	IAME								
STREET ADDRESS			4.3 S	TREET	ADDRESS							
CITY-ST-ZIP			4.4 C	ITY-ST	Γ-ZIP							
TITLE		☐ DELETE	5.1 TI	TLE						☐ CH	nange	☐ Addition
NAME			5.2 N	AME								
STREET ADDRESS			5.3 S	TREET	ADDRESS							
CiTY-ST-ZiP			5.4 C	ITY-S1	r- ZIP							
TITLE		DELETE	6 1 TI	TLE						Ch	iange	Addition
NAME			6.2 N	AME								
STREET ADDRESS			6.3 S	TREET	ADDRESS							
CITY-ST-ZIP			6.4 C	ITY-S1	T-ZIP							
14 hereby	certify that the informat on supplied	with this filing does not qualify	for the exe	mpti	on stated	ir Section 119.0	7(3)(i), Florida Statutes.	I further	c erti	fy tha	it the ir	nformation
indicat∈d officer or	on this annual report or supplemen director of the corporation or the re or Block 13 if changed or on an att	tal annual report is true and ac ceiver or trustee empowered to	curate and execute t	i that his re	t my signa eport as re	tt re shall have the equired by Chapte	ne same iegai eπect as i	ır maαe ι	ınaer	roain	і; ілаі і	स्था। था।

SIGNATURE:

RINTED NAME OF SIGNING OFFICE: OR DIRECTOR (7/54) KRIEK 26 Apr 99 941-403-9906

Daytime Phone #

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90033 044 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

CR2E034 (11/98)