

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


FILED  
Feb 18, 1999 8:00am  
Secretary of State

02-18-1999 90078 006 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000000471  
1. Corporation Name  
KIM-JIM, INC.

Principal Place of Business: C/O WILLIAMSBURG POTTERY FACTORY LIGHTFOOT VA 23090  
Mailing Address: C/O WILLIAMSBURG POTTERY FACTORY LIGHTFOOT VA 23090

2. Principal Place of Business (1-4)  
2a. Mailing Address (26-30)  
Suite, Apt. #, etc. (2)  
City & State (3)  
Zip (4), Country (25)  
Suite, Apt. #, etc. (26)  
City & State (27)  
Zip (28), Country (29)

3. Date incorporated or Qualified: 12/19/1995  
4. FEI Number: 54-1765776  
Applied For: Not Applicable  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
8. This corporation owes the current year Intangible Personal Property Tax: Yes  No

9. Name and Address of Current Registered Agent  
BARNES, KATHRYN  
9151 BROADWAY E.  
ESTERO FL 33928

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
FL 85 Zip Code

I, the undersigned, being a resident qualified person, do hereby certify that I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	DELETED	1.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
PDC MALONEY, JAMES E 1009 LIGHFOOT RD. WILLIAMSBURG VA 23188	<input type="checkbox"/>	1.2 NAME	<input type="checkbox"/>
STDC MALONEY, KIMBERLY A 1009 LIGHFOOT RD. WILLIAMSBURG VA 23188	<input type="checkbox"/>	1.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	1.4 CITY-ST-ZIP	<input type="checkbox"/>
	<input type="checkbox"/>	2.1 TITLE	<input type="checkbox"/>
	<input type="checkbox"/>	2.2 NAME	<input type="checkbox"/>
	<input type="checkbox"/>	2.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	2.4 CITY-ST-ZIP	<input type="checkbox"/>
	<input type="checkbox"/>	3.1 TITLE	<input type="checkbox"/>
	<input type="checkbox"/>	3.2 NAME	<input type="checkbox"/>
	<input type="checkbox"/>	3.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	3.4 CITY-ST-ZIP	<input type="checkbox"/>
	<input type="checkbox"/>	4.1 TITLE	<input type="checkbox"/>
	<input type="checkbox"/>	4.2 NAME	<input type="checkbox"/>
	<input type="checkbox"/>	4.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	4.4 CITY-ST-ZIP	<input type="checkbox"/>
	<input type="checkbox"/>	5.1 TITLE	<input type="checkbox"/>
	<input type="checkbox"/>	5.2 NAME	<input type="checkbox"/>
	<input type="checkbox"/>	5.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	5.4 CITY-ST-ZIP	<input type="checkbox"/>
	<input type="checkbox"/>	6.1 TITLE	<input type="checkbox"/>
	<input type="checkbox"/>	6.2 NAME	<input type="checkbox"/>
	<input type="checkbox"/>	6.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	6.4 CITY-ST-ZIP	<input type="checkbox"/>

I 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, with all other like empowered.

SIGNATURE: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date: 1-22-99 757-564-3326

CR2E034 (1/198)