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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9800003078 1. Corporation Name

K.C. ELECTRO-MECHANICAL, INC.

Principal Place of Business	
957 STATE HWY 33 WEST	
HIGHTSTOWN NJ 08520	

Mailing Address

957 STATE HWY 33 WEST HIGHTSTOWN NJ 08520

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

02-18-1999 90024 018 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed 06/01/1998

		•••			00/01/1000			
2. Principal P	I Place of Business 2a. Mailing Address		4. FEI Number		A <sub>1</sub>	pplied For		
21		26			22-3206644		No.	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			E Contiferate of Status Desire		\$8.75	Additional
22		27			5. Certifcate of Status Desire	ed 🗆	Fee R	equired
City & Stat	le	City & State			6. Election Campaign Finance	ino	\$5.00	May Be
23		28			Trust Fund Contribution	"a 🗆		to Fees
Zip	Country	Zip	Country		8. This corporation owes the	ourront upor		
24	25	<b>⊢</b> ' ⊢	30		Personal Property Tax.	current year	∏ Yes	□No
E-T	9. Name and Address of Current	<del></del>	, v		10. Name and Address of Ne	our Booletors		
	The state of the s	registered rigent	81	Name	10. Name and Address of In	re Registere	u Agent	
MARSHALL, DAVID		Hamo						
		Street Add	Address (P.O. Box Number is Not Acceptable)					
		Cake 1881 of the first flow of the latter of						
		83	83					
				0.0		1 4 4 1 1 2 2 4 1 8 22	用程 野鼠性縣	13381141-681
	1		84	City		F	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607 1508 Florida Statutes	the above	-named corn	poration submits this statement for		_	registered
office or r	egistered agent, or both, in the State of	Florida. Such change was aut	horized by t	the corporation	on's board of directors. I hereby a	ccept the apr	ointment as re	gistered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	da Statutes.		•			_
SIGNATURE								i
	Signature, typed or printed name of registered agent a			signature require	ed when reinstating)	DATE		_
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO	OFFICERS A		ORS IN 12
TITLE	P	☐ DÉLETE	1.1 TITLE	i	12 6458 Kine		Change	☐ Addition
NAME	KULIK, DANIEL		1.2 NAME					ł
STREET ADDRESS	3 NATHANIEL DR		1.3 STREET	ADDRESS				
CITY-ST-ZIP	ENGLISHTOWN NJ 07726		1.4 CITY-ST					
TITLE		☐ DELETE	2.1 TITLE	· Zir			Change	Addition
NAME							□ onange	- Addition
			2.2 NAME	ļ				
STREET ADDRESS			2.3 STREET	ADDRESS			ž	
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NAME , "			3.2 NAME					
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CITY-ST-ZIP	•		3.4. CITY-ST	- 7IP	and the second of the second	أوتجا إدوار والأقرار		
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NAME			4, 2 NAME					
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CITY-ST-ZIP			4.4 CITY-ST-	ZIP				
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NAME			5.2 NAME					
STREET ADDRESS	**		5.3 STREET	ADDRESS .				ļ
CITY-ST-ZIP			5.4 CITY-ST-	ZIP				}
TITLE		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition
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	± €			NDDDESS				Ì
STREET ADDRESS			6.3 STREET A	1				,
CITY-ST-ZIP			6.4 CITY-ST-					
<ol> <li>I hereby conditional contents</li> </ol>	ertify that the information supplied with on this annual report or supplemental ar	this filing does not qualify for the noual report is true and accurate	ne exemptio te and that i	n stated in S my signature	ection 119.07(3)(i), Florida Statute shall have the same legal effect a	es. I further co	ertify that the in der oath; that i	nformation 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.