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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G28968

(7)

K.C.A. ENTERPRISES, INC.

FILED Apr 08 1998 8:00am Secretary of State

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Principal Plac	ce of Business	Mailing Address		- E DEDICOLORNE COMPS TAKEN AND A DICAL COST.	1 81911 81811 91811 91811 91811 1891	
C/O COMMERCIAL SERVICES COMPANY 8251 A N. DIXIE HWY FORT LAUDERDALE FL 33334 C/O COMMERCIAL SERVICES COMPANY 6251 A N. DIXIE HWY FORT LAUDERDALE FL 33334				DO NOT WRITE IN T	THIS SPACE	
				3. Date Incorporated or Qualified 03/22/1983		
2. Principal F	Place of Business	2a. Mailing Address 26		4. FEI Number 59-2346392	Applied For Not Applicable	
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	60 7E	
City & Sta	to	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country 25	Zip 29	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.		
	9, Name and Address of Curr	4	1001	10. Name and Address of New Registe		
JA	CKSON, W.L.					
6251 N. DIXIE HWY. FT. LAUDERDALE FL 33334			82 Street Add	et Address (P.O. Box Number is Not Acceptable)		
"	. DAUDENDALE PL 33334		63			
			84 City		FL 85 Zip Code	
office or	to the provisions of Sections 607.0: registered agent, or both, in the Sta am familiar with, and accept the obl	ite of Florida. Such change was	authorized by the corpora	poration submits this statement for the purporation's board of directors. I hereby accept the	se of changing its registered a appointment as registered	
SIGNATURE	Stonature, typed or printed name of registered a	spent and title if anylogable (NO	TE Registered Agent signature requ	ired when reinstation)	ATE .	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	PCD	☐ DELETE	1.1 TITLE	ADDITIONAL OF TAXABLE TO OTT TO ETTO	Change Addition	
NAME	KING, MICHAEL E. (CHMN)		1.2 NAME			
STREET ADDRESS	6251 A N. DIXIE HWY		1.3 STREET ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 333	134	1.4 CITY-ST-ZIP			
TITLE	STD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	KING, LILIANE M. T.		2.2 NAME			
STREET ADDRESS	6251 A.N. DIXIE HWY		2.3 STREET ADDRESS		•	
CITY-ST-ZIP	FORT LAUDERDALE FL 333	134	2. 4 City-St-Zip			
TITLE	VP	DELETE	3.1 TITLE		Change Addition	
NAME	KING, STEVEN		3.2 NAME			
STREET ADDRESS	6251 A N. DIXIE HWY		3.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33334	}	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 ☐ 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 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 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

STEVEN KING

4/, 198 954-491-7878