Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90117 033 ***150.00

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 # G50443

1. Corporation Name

K.C. EN	TERPRISES OF VERO BEA	ACH, INC.						
Principal Plac	e of Business	Mailing Address				I I TO I I TO I I TO I TO I TO I TO I T	BIRKI BIBIK BIBIK B	REAL BIBIT FEAT
1669 OLD DIXIE HIGHWAY 1669 OLD DIXIE HIGHWAY								
VERO BEACH FL 32960 VERO BEACH FL 32960						DO NOT MIDITE IN THIS	0.00400	
						DO NOT WRITE IN THIS	5 SPACE	
						3. Date Incorporated or Qualifed		
D. Mailler Address						07/20/1983 4. FEI Number		plied For
─ ·	Principal Place of Business 2a. Mailing Address							t Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						59-2310110	\$8.75	
—						5. Certificate of Status Desired	Fee Re	
City & Stat	te ·	City & State	•		····	6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added t	
Zip	Country	Zip	Cot	intry		8. This corporation owes the current year Ir	ntangible	
24	25	29	30			Personal Property Tax.	Yes	□No
4 j	9. Name and Address of Curr		11	<u> </u>		10. Name and Address of New Registered	l Agent	
				81	Name			
Sandor, Cheryl S. 1669 Old Dixie Hwy				82	Street Add	dress (P.O. Box Number is Not Acceptable)		
				~	Olice: Add	moss (i .o. box rumber to rect toop about		
VERO BEACH FL 32960				83				
				0.4	C:t-		85 Zip (Code
				84	City	poration submits this statement for the purpose o		
agent. I a	egistered agent, or both, in the Statum familiar with, and accept the obligations of the statum of t	gations of, Section 607.0505,	Flonda Stat	utes.	•	ion's board of directors. I hereby accept the appointment of the process of the p		
12.	· · · · · · · · · · · · · · · · · · ·	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PD	☐ DELETE					☐ Change	☐ Addition
NAME	SANDOR, KENNTH V		1.2 N	AME				}
STREET ADDRESS			1.3 S	TREET	ADDRESS	•		
CITY-ST-ZIP	VERO BCH FL			ITY-S1	T-ZIP		CT Change	Addition
TITLE	_			2.1 TITLÉ			Change	☐ Addition
NAME	SANDOR, CHERYL S.		2.2 N					
STREET ADDRESS			2.3 S	TREET	ADDRESS			
CITY-ST-ZIP	VERO BCH FL			2.4 CITY-ST-ZIP 3.1 TITLE			☐ Change	Addition
TITLE		☐ DELETE	1				□ Citalige	
NAME			3.2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		DELETE		ITY-S	T-ZIP		Change	☐ Addition
TITLE	1	L'I DELETE					□ ouguge	
NAME			4,21					
STREET ADDRESS					ADDRESS			}
CITY-ST-ZIP		☐ DELETE		TY-\$1	T-ZIP		☐ Change	Addition
TITLE		ר"ו אברבונ	5.1 T					
NAME					TADDRES\$			}
STREET ADDRESS				ITY-SI				}
CITY-ST-ZIP		☐ DELETE			1-411-		☐ Change	Addition
TITLE			6.2 N				_ >90	
NAME STREET ADDRESS		/			FADDRESS			

14. I hereby certify that the information supplied with this fling 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 trostee 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, grown an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Sel-567-3123