FILED

Feb 14, 2003 8:00 am

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

G70117 DOCUMENT



Secretary of State 02-14-2003 90220 040 ***150.00 1. Entity Name KESSEL KIRSCHNER REAL ESTATE GROUP. INC. Mailing Address Principal Place of Business 1332 DESOTO STREET 1332 DESOTO STREET MELBOURNE FL 32935-7070 MELBOURNE FL 32935-7070 U\$ 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2413855 Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ≃Name ≡ KESSEL, KIRK W. Street Address (P.O. Box Number is Not Acceptable) 1332 DESOTO STREET **MELBOURNE FL 32935-7070** Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 10. Addition CR2E034 (10/02) ☐ Change DM TITLE ☐ Delete TITLE STANLEY M KIRSCHNER NAME KESSEL, KIRK W NAME 1332 DESOTO STREET STREET ADDRESS 1332 DESOTO STREET STREET ADDRESS CITY-ST-ZIP MELBOURNE, FL 32935-707 MELBOURNE FL 32935-7070 CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME KIRSCHNER, STAN M NAME STREET ADDRESS STREET ADDRESS 1332 DESOTO STREET CITY-ST-ZIP MELBOURNE FL 32935-7071 CITY-ST-ZIP [] Change ☐ Addition ☐ Delete TITLE TITLE NAME KIRSCHNER, GREG A NAME STREET ADDRESS 1332 DESOTO STREET STREET ADDRESS CITY-ST-ZIP MELBOURNE FL 32935-7070 CITY-ST-7IP ☐ Change ☐ Addition TITLE ... Defete TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



Date

Daytime Phone #