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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPAF:TMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # G83958

Country

1. Corporation Name

K & V INDUSTRIES, INC.

Principal Place of Business 931 CARSWELL AVENUE HOLLY HILL FL 32117-0515

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

21

22

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

931 CARSWELL AVENUE HOLLY HILL FL 32117-0515

FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90058 047 ***150.00



Appled For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

50 No

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This co poration owes the current year Intangible

Trust Fund Contribution

02/09/1984

59-2382733

4. FEI Number

24	25	[29]	30			1 613618	6 Floperty Tax.			
	9. Name and Address of Current	Registered Agent		<u> </u>		10. Name	ind Address of New	Registered	Agent	
DILLI	NGER, TODD			81	Name					
2979 BRISTOL LANE					Street Ad	iress (P.O. Box	Number is Not Accep	otable)		
S DAYTONA FL 32119				83						
O Lin	TOTALE SELIS									
				84	City			FL	85 Zip 0	
office o r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	o: Florida, Such change w	/as a uthorize	d by t	-named co he corpora	poration submit tion's board of di	s this statement for thirectors. I hereby acc	e purpose of ept the appo	changing its intment as re	registered gistered
SIGNATURE								DATE		
	Signature, typed or printed nar ie of registered agen	I nd title if applicable.			signature requ	red when reinstating)	NS/CHANGES TO C		ID DIRECTO	ES IN 12
12.		DELET	E 11.1			ADDITIO	NO/CHANGES TO C	A LIOLKS AI	Change	Addition
TITLE	P ANDROY	L DECE			j					
NAME	ARODDIO, ARDITETT			AME						
STREET ADDRESS			1.3 \$	TREET.	ADDRESS					
CITY-ST-ZIP	S. DAYTONA FL			ITY-ST					Change	Addition
TITLE	VST	☐ DELET	E 2.1 T	ITLE		~			Change	☐ Accilion
NAME	LARUBBIO, LILLIAN		2.2 N	AME						
STREET ADDRE 3S	18 BRYAN CAVE ROAD		2.3 8	TREET	ADDRESS					
CITY-ST-ZIP	S. DAYTONA FL			CITY-ST						
TITLE		☐ DELET	E 3.1 T	ITLE		57			Change	Addition
NAME			3.2 N	IAME		TRACY	WATI	a 2015	-	
STREET ADDRESS			335	TREET.	ADDRESS .	15-89 7	WATT USKALOOSA	, ,,,,,		
CITY-ST-ZIP			3.4. 0	CITY-ST	r-ZIP	4044	HILL, FL	32/	<u> 17</u>	
TITLE		☐ DELET	E 4.1 T	ITLE					Change	☐ Addition
NAME			4.21	NAME						
STREET ADDRESS			4.3 9	TREET	ADDRESS					
CITY-ST-ZIP			440	ITY-ST	-ZIP					
TITLE		☐ DELET							Change	Addition
NAME			5.2 N	IAME						
STREET ADDRESS			5.3 5	TREET	ADDRESS					
CITY-ST-ZIP			5.4 0	ITY-ST	-ZIP					
TITLE		☐ DELE1	E 6.1 T	TTLE					☐ Change	Addition
NAME				IAME	İ					
)		6.3 5	TREET	ADDRESS					
STREET ADDRESS			1	ITY-ST						
CITY-ST-ZIP	certify that the information supplied will	a this filing doos not avail				Section 119 0"	(3)(i) Florida Statute	s I further ce	rtify that the i	r formation

Country

4. I herety certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.0. (3)(i), Florida Statutes. I further Gertify 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 than 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 than 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

W J. LARUBBIO

4-24-99

904-258-0052

Daylime Phone #

CR2E034 (11/98)