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 # H35792

1. Corporation Name

K B CORROBATION OF VENICE INC

| K. H. CC | JHPUKATIUN UF VENIUE, | INC. | | | | | | |
|--|-----------------------------|----------------------|----------|---|---|-----------------------|-------------|----------------|
| Principal Plac | e of Business | Mailing Address | | _ | (imminist kirks siens anni consections | 1191 AIBH B1811 B1811 | #1811 B10 | 911 81831 1981 |
| 566 OAK BAY | DRIVE | C/O COLLETTE LADD | | | · · | | | |
| OSPREY FL 34229 P.O. BOX 533 | | | | | DO NOT WRITE IN THIS SPACE | | | |
| US NOKOMIS FL 34274 US | | | | | 3. Date Incorporated or Qualifed | 11110 01 700 | | |
| | | 00 | | | 12/26/1984 | | | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | 4. FEI Number Applied For | | | lied For |
| <u></u> | | | | | 59-2474805 | . | | Applicable |
| 25 Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | T | \$8. | | iditional |
| 22 27 | | | | | 5. Certifcate of Status Desired | | ee Req | |
| City & Stat | City & State | | | 6 Election Campaign Financing \$5.00 May Be | | | Aav.Be | |
| 23 | | 28 | | | Trust Fund Contribution Added to Fees | | | |
| Zip | Country . | Zip | Coun | try | 8. This corporation owes the current | t year Intangible | | |
| 24 | 25 | 29 | 30 | | Personal Property Tax. | □ Yes | s [| □No |
| | 9. Name and Address of Curr | ent Registered Agent | | | 10. Name and Address of New Reg | jistered Agent | | |
| | | | | 81 Name | | | | |
| LADD, COLLETTE | | | | 82 Street Add | ress (P.O. Box Number is Not Acceptable | 9) | | |
| | OAK BAY DRIVE | • | ľ | 0.0007.00 | | | | ·-·· |
| OSPREY FL 34229 | | | | 83 | | | | |
| | | | ļ. | B4 City | | 85 | Zip Co | nde |
| • | | | | City | | FL " | Lip O | , |
| 12. | | AND DIRECTORS | 13. | gent signature require | ADDITIONS/CHANGES TO OFFIC | | | |
| TITLE | DPS | ☐ DELETE | 1.1 TITL | E | | ☐ Ch | ange | Addition |
| NAME | LADD, COLLETTE | | 1.2 NAA | AE | | | | |
| STREET ADDRESS | 566 OAK BAY DRIVE | | 1.3 STR | EET ADDRESS | | | | |
| CITY-ST-ZIP | OSPREY FL 34229 | | 1.4 CIT | r-ST-ZIP | | | | - Addition |
| TITLE | T | ☐ DELETE | 2.1 T(T) | E | | ☐ Ch | ange | Addition |
| NAME | LADD, COLLETTE | | 2.2 NAA | AE . | | | | |
| STREET ADDRESS | | | 2.3 STR | EET ADDRESS | | | | |
| CITY-ST-ZIP | OSPREY FL 34229 | | 2. 4 CIT | Y-ST-ZIP | | | | |
| TITLE | | ☐ DELETE | 3.1 1111 | F | | , 🗀 Ch | ange | ☐ Addition |
| NAME | | | 3.2 NAA | AE | | | | |
| STREET ADDRESS | \$ | | 3.3 STR | REET ADDRESS | | | | |
| CITY-ST-ZIP | | | _ | Y-ST-ZIP | | F 3.0L | | Addition |
| TITLE | | ☐ DELETE | 4.1 TITL | .E | | □ Ch | .ange | |
| NAME | • | | 4. 2 NA | ŀ | | | | |
| STREET ADDRESS | | | | EET ADDRESS | | | | |
| CITY-ST-ZIP | | | | /-ST-ZIP | <u> </u> | | 2000 | ☐ Addition |
| TITLE | | ☐ DÉLETE | 5.1 TITL | I | | ☐ Ch | .anye | |
| NAME | | | 5.2 NAA | I | | | | |
| STREET ADDRESS | | | | EET ADDRESS | | | | |
| CITY-ST-ZIP | <u> </u> | | | Y-ST-ZIP | | | 12000 | Addition |
| TITLE | | ☐ DELETE | 6.1 TITL | 1 | | □ Ch | anye | C) AGUIUON |
| NAME | | | 6.2 NAM | 1 | | | | |
| STREET ADDRESS | | | 6.3 STF | REET ADDRESS | | | | |

CITY-ST-ZIP 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 required or trustee employered 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.

6.4 CITY-ST-ZIP

SIGNATURE:

941-966-2581

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90114 013 ***150.00