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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT 1997				Secretary of State DIVISION OF CORPORATIONS				Secretary of State					
DOC 1. Corpo	UMENT oration Namo	# H43 99	4	(3)									
K₁ B	URKS, INC.												
									1 1 16 (8) (8) (8) (8) (8) (8) (8) (8)				
Principal	Place of Business	P.D.	Mai	lina Addronn									
Principal Place of Business				Mailing Address						*************	,,6,,,		****
262 MIMOSA RD. P.O. BOX 5133 8T. AUGUSTINE FL 32085				262 MIMOSA RD. P.O. BOX 5133									
			ST.	ST. AUGUSTINE FL 32085-5133				3	Date incorporated or Q	ualified	3a Da	ate of Las	Report
									•			06/1996	
	pal Place of Busi	inass	2a.	Mailing Address				4.	02/22/1985 FEI Number		Q O J.		Applied For
21	Apt. #, etc.		26	Suite, Apt. #, etc.				+	59-2506473				Not Applicable
22	Apt. #, etc.		27	Suite, Apr. #, etc.				5.	Certificate of Status Des	sired	又		Additional Required
City &	State			City & State				6.	Election Campaign Fina	ncing		\$5.0	0 May Be
23		aparama <u>a</u> come a secondo de come	28	garage and a second constraint					Trust Fund Contribution				d to Fees
Zip		Country	}ı	7ip Country			,	8.	This corporation has lial Florida Statutes	oility for in	tangible Yes	tax unde⊧ ∃ No	s. 199.032,
241	9. Name	25 e and Address of Curr	29 ent Registe	ered Agent	30			10.	Name and Address of	New Reg			
	BURKS, KENN	IETH P.				81	Name		and all the state of the state				***************************************
262 MIMOSA RD.				82 Street A			Street Addre	ess (F	P.O. Box Number is Not A	cceptab	e)		
	ST. AUGUSTIN	NE FL 32086				83							
									DI DALBA BUNA BUNA BUNA BUNA BUNA BUNA BUNA BU				
i						84	City				FL	85 7	p Code
11. Purs	uant to the provis	sions of Sections 607.0	502 and 60	7.1508, Florida Statu	ites, the ab	OOVE	e-named corporation	oratio	n submits this statement board of directors. I here	for the p	irpose of	changing	j its registered
ager	nt. I am (a miliar w	with, and accept the ob-	igations of,	Section 607.0505, F	Iorida Stat	utes	3.	0.101	socia of directors, i fleroi	sy uooop	i ino upp	OF ILL TOTAL	as regioterou
SIGNATU	JRE Signature type	nd or printed name of registered	accord and title if	anolicable (NC)) F. Brenislerer		ent signature require	ed wher	reinstatino)		DATE	· · · · · · · · · · · · · · · · · · ·	
12.		OFFICERS A		1ORS	13.				ADDITIONS/CHANGES T	O OFFIC	ERS AND	DIRECT	ORS IN 12
TETLE	PST			☐ DELETE	1.1 10	LE						☐ Chang	e 🔲 Addition
NAME		KENNETH P.			1.2 NA		IDDDEGO.						
STREET ADD		IOSA ROAD USTINE FL			1.3 S!		ADDRESS T- 7/P						
TITLE	VP	651114P 1-P		☐ DELETE	2.1 111							Chang	Addition
NAME	1 **	K, KAREN			2.2 NA	ME							
STREET ADD	1 10 0014						ADDRESS						
CITY-\$T-ZII	ST. AUG	BUSTINE FL		DECETE	2. 4 Cl 3.1 1 IT		ST - ZIP		The same of the sa	~/±		Chang	Addition
NAME					3.2 NA					*: -			
STREET ADD	RESS				3.3 \$1	REET	ADDRESS						
CITY-ST-ZII					3.4. CI		ST-21P		No. 1904 - 1 The Atlantain Court Mark State Court of the Atlanta Court of the Court				
TITLE				☐ DELETE	4.1 TiT							Chang	e 🔲 Addition
NAME STREET ADD	0566				4. 2 N/		ADDRESS						
CITY-ST-ZII					4.3 ST								
TITLE				☐ DELFTE	5.1 111				AND THE REPORT OF THE PARTY OF			Chang	Addition
NAME					5.2 NA	ME							
STREET ADD							ADDRESS						
CITY-ST-ZII	<u> </u>			DELETE	5.4 CIT 6.1 TIT		1- ZIP					Chang	Addition
"NAME "				E OLLLIE	6.2 NA							Sileny Com	- La roundil
	1 '				B 11.7 IVA								

74. I do 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 amula 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 12 or Block 12 if changed, or on an attachment with an address.

FILED

Apr 15 1997 8:00am