## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **H54655** 1. Entity Name KDH ENTERPRISES, INC. Principal Place of Business Mailing Address 3418 EAST LAKE ROAD 771 CREEKSIDE LANE PALM HARBOR FL 34684-3208 PALM HARBOR FL 34685 2. Principal Place of Business 3. Mailing Address

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable,

OFFICERS AND DIRECTORS

Suite, Apt. #, etc.

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

NAME

TITLE

NAME

TITLE NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

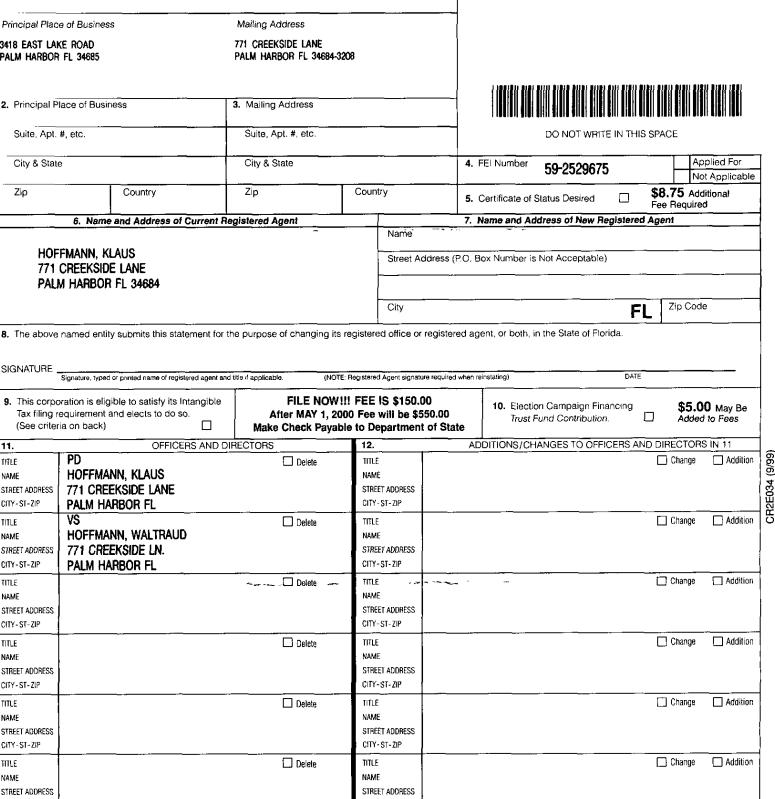
Name

City & State

Zip

## FILED Mar 29, 2000 8:00 am **Secretary of State**

03-29-2000 90047 041 \*\*\*150.00



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 11 or Block 12 if with all other like empowered

CITY-ST-ZIP

Suite, Apt. #, etc.

HOFFMANN, KLAUS

771 CREEKSIDE LANE PALM HARBOR FL 34684

9. This corporation is eligible to satisfy its Intangible

HOFFMANN, KLAUS

PALM HARBOR FL

771 CREEKSIDE LN.

PALM HARBOR FL

771 CREEKSIDE LANE

HOFFMANN, WALTRAUD

Tax filing requirement and elects to do so.

City & State

Zip

SIGNATURE

11.

TITLE

NAMÉ STREET ADDRESS

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE NAME

CITY-ST-ZIP

STREET ADDRESS CITY-ST-7IF

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIF

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIF

CITY-ST-ZIF

(See criteria on back)

KLAUS HOFFHANN 3/25/00 D NAME OF SIGNING OFFICER OR DIRECTOR