

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # H96948 1. Entity Name KES BETHCO, INC.																																																																																																																	
Principal Place of Business 5258 LINTON BLVD, STE. 304 DELRAY BEACH FL 33484			Mailing Address 5258 LINTON BLVD, STE. 304 DELRAY BEACH FL 33484																																																																																																														
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																																																																																															
City & State Zip Country		City & State Zip Country		4. FEI Number 59-2641733 ☐ Applied For ☐ Not Applicable																																																																																																													
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent ALTMAN, FRED E. 5258 LINTON BLVD, STE. 304 DELRAY BEACH FL 33484																																																																																																															
7. Name and Address of New Registered Agent Name Street Address (P O Box Number is Not Acceptable) City FL Zip Code		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																																																																																																	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																														
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">S</td> <td style="width: 20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>ALTMAN, FRED E</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5258 LINTON BLVD, STE. 304</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>DELRAY BEACH FL 33484</td> <td></td> </tr> <tr> <td>TITLE</td> <td>PTD</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>ALTMAN, BETH</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5258 LINTON BLVD, STE. 304</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>DELRAY BEACH FL 33484</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">U000000025160</td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>02/02/04-80095-002 50.00</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>						TITLE	S	☐ Delete	NAME	ALTMAN, FRED E		STREET ADDRESS	5258 LINTON BLVD, STE. 304		CITY - ST - ZIP	DELRAY BEACH FL 33484		TITLE	PTD	☐ Delete	NAME	ALTMAN, BETH		STREET ADDRESS	5258 LINTON BLVD, STE. 304		CITY - ST - ZIP	DELRAY BEACH FL 33484		TITLE		☐ Delete	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		☐ Delete	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		☐ Delete	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE	U000000025160	☐ Change ☐ Addition	NAME	02/02/04-80095-002 50.00		STREET ADDRESS			CITY - ST - ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY - ST - ZIP		
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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: <i>Fred E. Altman</i> <i>Beth Altman</i> 1-24-04 (501) 495-4186																																																																																																																	