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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J05358

(3)

K.T. MAC ENTERPRISES, INC.

FILED
Apr 16 1998 8:00am
Secretary of State

|--|--|

					A BIBRE BEGER BROOK BEEK BEGER
•	ce of Businoss	Mailing Address			
2703 NE 2NI BOCA RATO		2703 NE 2ND AVE BOCA RATON FL 33431 US		DO NOT WRITE IN T	HIS SPACE
US		08		3. Date Incorporated or Qualified	
				03/21/1986	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 /45		28 1458 27	4 AVE	59-2669403	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
	FRO BEACH, FL	28 VERO BE.		Trust Fund Contribution	Added to Fees
^{Zip} შე	960 25 U.S.A.	Zip 23.5	Country 45.4.	8. This corporation owes or has paid the	
24 37	9 Name and Address of Curren		0 43.4.	Personal Property Tax due June 30. 10. Name and Address of New Registe	
49		K Vadistalen võelit	81 Name a		100 Agoin
	TWOOD, FRANK W 158 27TH AVE.		#T	WOOD, FLANK W.	
•			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
As	ERO BEACH FL 32960		83 / Y S	18 21-1905	
			84 City 1/ -	LO BENCH	85 Zip Code
dd Digwynnt	to the exercisions of Sections 607 050	2 and 607 1609 Florida Statutes	the above samed core	poration submits this statement for the purpo	96 <i>o</i> و ج
office or	registered agent, or both, in the State	of Florida, Such change was au	thorized by the corporat	tion's board of directors. I hereby accept the	appointment as registered
agent. La	am familiar with, and accept the obliga	ations of, Section 607.0505, Flori	da Statutes.		
SIGNATURE	Signature, based or printed name of egithered age	and said talle if persiscable (AVATE)	Registered Agent signature requir	red when reinstating) DA	TE
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	DP .	DELETE	1.1 TITLE	7,001110100010010010010010010010010010010	Change Addition
NAME	ATWOOD, FRANK W JR.		1.2 NAME		
STREET ADDRESS	1458 27TH AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME	1		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14 I hereby	certify that the information supplied w	ith this filing does not qualify for		Section 119.07(3)(i), Florida Statutes. I furth	er certify that the information

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 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 13 if changed, or on an attachment with an address.

SIGNATURE:

Name of the last o

8-6-98

561-83-4969