

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K07955

1. Entity Name

KAMEN, INC.

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90009 022 ***150.00

Principal Place of Business

Mailing Address

5805 N. COOLIDGE 4602 FAIRWAY DRIVE
TAMPA FL 33614 TAMPA, FL 33603
US

5805 N. COOLIDGE 4602 FAIRWAY DRIVE
TAMPA FL 33614-6421 TAMPA, FL 33603
US

708429



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

4602 FAIRWAY DRIVE
Suite, Apt. #, etc.

4602 FAIRWAY DRIVE
Suite, Apt. #, etc.

City & State

City & State

TAMPA FL

TAMPA FL

Zip 33603

Country

HILLSBOROUGH

Zip 33603

Country

HILLSBOROUGH

4. FEI Number 59-2861375

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SILVERSTEIN, KEN
4602 FAIRWAY DRIVE
TAMPA FL 33603

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.

SIGNATURE

Ken Silverstein

Ken Silverstein

1/24/2000

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PS	<input type="checkbox"/> Delete
NAME	SILVERSTEIN, KEN	
STREET ADDRESS	4602 FAIRWAY DRIVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	SILVERSTEIN, KEN	
STREET ADDRESS	4602 FAIRWAY DRIVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SILVERSTEIN, AME	
STREET ADDRESS	4602 FAIRWAY DRIVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	GONZALEZ, REX	
STREET ADDRESS	4602 FAIRWAY DRIVE	
CITY-ST-ZIP	TAMPA FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ken Silverstein

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/2000

Date

813-310-4513

Daytime Phone #