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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

K19040

(0)

K & K ACCOUNTING & TAX SERVICE, INC.

**FILED** Mar 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					1 (84)0)11 80% 15010 19111 8011 91011 8011 8801 91011 91017 01017 01017 1001	
4700 STATE I	4700 STATE RD. 7 4700 STATE RD. 7					
STE. 221 STE. 221						DO NOT WRITE IN THIS SPACE
FORT LAUDERDALE FL 33319 FORT LAUDERDALE FL 33319					3. Date Incorporated or Qualified	
						03/18/1988
2. Principal P	2a. Mailing Address	Address			4. FEI Number Applied For	
21		26				65-0038678 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22		27			Fee Required	
City & State	e	City & State	¬ ´			6. Election Campaign Financing \$5.00 May Be
23		Zip Country			Trust Fund Contribution	
Zip	Country	<del></del>	<del></del>	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
24 25 29 30 9, Name and Address of Current Registered Agent			[30]	T		10. Name and Address of New Registered Agent
					Name	
4700 STATE RD. 7				82	Stront Addre	ess (P.O. Box Number is Not Acceptable)
STE. 221				62	Stiggt Mubic	ess (r.o. box (quiriber is 140) Acceptable)
	RT LAUDERDALE FL 33319			83		
				84	City	85 Zip Code
					•	<b>FL</b>   1   1   1   1   1   1   1   1   1
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered						
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
				d Age:	nt signature require	ed when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PD OF MOLENS AF	DELETE	13. 1.1 Ti	ITLE		Change Addition
NAME	KENT, DONNA J		1.2 N			
STREET ADDRESS	5251 NW 96TH DRIVE		1.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 CITY-ST-			
TITLE		DELETE	2.1 T			Change Addition
NAME			2.2 N	AME		
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP			2.40	CITY - S	T-ZIP	
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME			3.2 N	AME		
STREET ADORESS			3.3 S	TREET	ADDRESS	
CITY-ST-ZIP			3.4. CITY - ST - ZIP		T-ZIP	
TITLE		☐ DELETE	4.1 T	ITLE		☐ Change ☐ Addition
NAME			4.21	AME		
STREET ADDRESS	TREET ADORESS		4.3 STREET ADDRESS		ADDRESS	
CITY-\$T-ZIP				4.4 CITY - ST - ZIP		Character Charac
TITLE		DELETE	5.1 Ti		· ·	Change Addition
NAME		•	5.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		I - ZIP	Change Addition
TITLE						Change L Admindi
NAME CTOTET ADDRESS			6.2 N		ADDRESS	
STREET ADDRESS					į.	
CITY-ST-ZIP 14. I hereby o	certify that the information supplied	with this filing does not qualify t		ITY - ST empt		Section 119.07(3)(i), Florida Statutes. I further certify that the information

officer or director of the corporation or the free in the same 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attachment with an address.