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

FILED Mar 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K69525 (9) KATYCO TEMPORARY LEGAL SECRETARIES, INC. Principal Place of Business Mailing Address 9231 SUN POINTE DR 9231 SUN POINTE DR **BOYNTON BCH FL 33437** BOYNTON BCH FL 33437 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/02/1989 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 Not Applicable 65-0106617 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 X Yes Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VANMORKHOVEN, MARCEL 9231 SUN POINTE DR 62 Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BCH FL 33437** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 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 Signature, typed or printed name of registered agent and title if applicable TF: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change ■ Addition DP TITLE 1.1 TITLE VANMORKHOVEN, KAY SHORT NAME 1.2 NAME 9231 SUN POINTE DR STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BCH FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME VANHORKHOVEN, MARCEL 22 NAME STREET ADDRESS 92231 SUN POINTE DR 2.3 STREET ADDRESS **BOYNTON BCH FL** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3.1 TITLE VANHORKHOVEN, MARCEL 3.2 NAME NAME 9231 SUN POINTE DR 3.3 STREET ADDRESS STREET ADDRESS **BOYNTON BCH FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ___ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY ST ZIP 5.4 CITY - ST- ZIP

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 reporter of 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 chapged, or on an appear with paradless. KATY SHORT VARMORKHOUSEN 03/19/98 737-1199 **SIGNATURE**

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST-ZIP

Change

Addition

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP