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 #

K76602

(7)

KITCHEN ART OF SOUTH FLORIDA INC.

FILED Jan 16 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address	Mailing Address			. I learnis am innie nitin eitit antie tidt dietr att	IE) OINII 21211	#1914 #1811 1981
% GREGOR			12340 WILES ROAD					
	RINGS FL 33076		CORAL SPRINGS FL 33076			DO NOT WRITE IN THIS SPACE		
US US						3. Date Incorporated or Qualified		
						03/30/1989	-	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	.	Applied For
⊢	INCO OF DESIFIESS					65-0121123		Not Applicable
21 Suite, Apt.	# etc	Suite, Apt. #, etc.				_		Additional
22	#, O.O.	27				5. Certificate of Status Desired		Required
City & Stat	e	City & State			-	6. Election Campaign Financing	¢5 ∩(Nov Bo
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country			8. This corporation owes or has paid the cur		
24	25	29		30				□ No
24	g. Name and Address of Currer		30			10. Name and Address of New Registered		
	ONES, GREGORY			81	Name			
1	35 NW 107TH WAY							
_			82 Street		Street Addre	ess (P.O. Box Number is Not Acceptable)		
١	CORAL SPRINGS FL 33071		ŀ	83				
]				-				
1			Ī	84	City	FL	85 Zip	Code
		4 4007 4500 57 11 07						the west followed
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	e of Florida, Such change wa	atutes, the ac	ove-r tiya b	named corpo he corporati	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	ointment a	s registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505,	Florida Statu	utes.		•		
SIGNATURE								
	Signature, typed or printed name of registered ag-			Agent:	signature require	ed when reinstating) DATE APPLITATION OF COLUMN TO COL	DIDEOTO	100 10140
12,		D DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND	Change	
TITLE	D ODEODY	T DETELE					Caladige	· La rounton
NAME	JONES, GREGORY			ME				
STREET ADDRESS			1.3 STE	REET AD	ODRESS			ļį
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 C		ZIP			
TITLE	D	☐ DELETE	2.1 TiT	LE			L Change	Addition C
NAME	JONES, GAIL M.		2.2 NA	ME				
STREET ADDRESS	235 NW 107TH WAY		2.3 STF	REET AD	odress			
CITY-ST-ZIP	CORAL SPRINGS FL		2, 4 CF	TY-ST-	- ZIP			
TITLE		☐ DELETE 3.1		LE	İ		Change	Addition
NAME		3.2		3.2 NAME				1
STREET ADDRESS			3.3 STF	REET AD	ODRESS			}
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NAME			5.2 NA				•	
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NAME			6,2 NAI					
STREET ADDRESS				reet ad				į
CITY-ST-ZIP		24t, 4t, t. \$31a		ry - \$1-2		Section 119 07(3)(i) Florida Statutes I further ce	etific that M	a information
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14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.0/(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 Lam 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.

SIGNATURÉ

DUME REGAREM JONES

753 350