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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K94520

(9)

FILED Feb 10 1998 8:00am Secretary of State

KVK, INC. Principal Place of Business Mailing Address KEY WEST BOUTIOUE KEY WEST BOUTIQUE 13499 U.S. 41 S.E. 13499 U.S. 41 S.E. FT. MYERS FL 33907 FT. MYERS FL 33907 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/12/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0126037 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Ζψ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BRUNTON, RICHARD W. Name **KEY WEST BOUTIQUE** Street Address (P.O. Box Number is Not Acceptable) 13499 U.S. 41 S.E. FT. MYERS FL 33907 83 84 City 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 registored 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 (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change ☐ Addition BRUNTON, RICHARD W. NAME 1.2 NAME 12672 INVEARRY CIRCLE STREET ADDRESS 1.3 STREET ADDRESS FT MYERS FL 33912 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE ☐ Change Addition BRUNTON, BARBARA A. NAME 22 NAME 12672 INVEARRY CIRCLE STREET ADDRESS 23 STREET ADDRESS FT MYERS FL 33912 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE Change 3 1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 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 Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 61 TITLE Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if phanged, or on an uttachment with an address

CIONATURE POR 19 1 Roy A

Richago W/Roward

7-5.90

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