

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L01219 (9)

1. Corporation Name

KMK ENTERPRISES, INC.



Principal Place of Business

Mailing Address

1786 BAYSHORE DRIVE
503 BAY SHORE DR
ENGLEWOOD FL 34223
US

1796 BAYSHORE DRIVE
503 BAY SHORE DR
ENGLEWOOD FL 34223
US

3. Date Incorporated or Qualified
07/10/1989

3a. Date of Last Report
04/28/1995

2. Principal Place of Business

2a. Mailing Address

21 1450 BEACH Rd.

26 1450 BEACH Rd.

4. FEI Number
65-0132701

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Englewood, FL

28 Englewood, FL

Zip

Country

Zip

Country

24 34223

25 Charlotte

29 34223

30 Charlotte

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ESTES, KAREN A.
1796 BAYSHORE DRIVE
ENGLEWOOD FL 34223

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 type for printed name of registered agent and office if applicable

(NOTE: Registered Agent signature required when reinstating)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME ESTES, KAREN A.
STREET ADDRESS 1796 BAYSHORE DRIVE
CITY - ST - ZIP ENGLEWOOD FL

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CITY - ST - ZIP

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11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

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31 TITLE
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34 CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

1450 BEACH ROAD
ENGLEWOOD, FL 34223

☒ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with an address

SIGNATURE

Karen A. Estes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-1-96 (941) 475-0733

Date Daytime Phone

CR2E034 (3/96)