

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L17032

(8)

1. Corporation Name

KEN & RUTH ENTERPRISES, INC.

Principal Place of Business

% KENNETH KETTENACKER
10093 WINDTREE LANE
BOCA RATON FL 33428

Mailing Address

% KENNETH KETTENACKER
10093 WINDTREE LANE
BOCA RATON FL 33428



3. Date Incorporated or Qualified

09/18/1989

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0155557

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

KETTENACKER, KENNETH
10093 WINDTREE LANE
BOCA RATON FL 33428

10. Name and Address of New Registered Agent

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

Kenneth Kettenacker
Signature, typed or printed name of registered agent, and title if applicable

ERROR !!
2007 FL Registered Agent Signature required when re-registering

4-27-96
DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

D

KETTENACKER, RUTH
10093 WINDTREE LANE
BOCA RATON FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

D

KETTENACKER, KENNETH
10093 WINDTREE LANE
BOCA RATON FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

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CITY- ST- ZIP

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CITY- ST- ZIP

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TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

13.

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Kenneth Kettenacker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-96

(407)488-2958

Date

Daytime Phone #

CR2E034 (12/95)