CR2E034 (9/99)

Daytime Phone #

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUI 1. Entity Name KINON,					Apr 22, 20 Secretar 04-22-2000 901	y of Sta	ite
Principal Place 1819 TREE SW. PALM HARBOR	ALLOW WAY	Mailing Address 1819 TREE SWALLOW WAY PALM HARBOR FL 34683-6276	0		1904	1	10 1 /10 1 11
2. Principal Pl	ace of Business OME AS ABOVE #,etc	3. Mailing Address SAMC AS ABOVE Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI	Number 59-2989178	No	oplied For of Applicable
Zip 	Country	Zip	Country			S8.75 Add Fee Required	
6. Name and Address of Current Registered Agent Name				7. Nam	e and Address of New Regis		
WAN, RAYMOND 364 WESTWIND DR				ress (P.O. Box I	Number is Not Acceptable)	<u> </u>	
	M HARBOR FL 34683		1	24 0	Deuls RETRI	SAT	 -
			City	RPONI	SPRINGS	FL 322	3f9
8. The above named entity spomits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!!-FEE.IS \$150:00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Star				0.00	Election Campaign Finance Trust Fund Contribution.		May Be
11.	OFFICERS AND D		12.		IONS/CHANGES TO OFFICE	RS AND DIRECTORS Change	S IN 11
TYTLE NAME STREET ADDRESS CITY-ST-ZIP	WAN, RAYMOND 364 WESTWINDS DR PALM HARBOR FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	WAN, 1524 C TARPO	RAYMOND. POULS RETRÉE] DN SPRINGS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WAN, PIT HUNG 364 WESTWINDS DR PALM HARBOR FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		, PIT HUNG VI EWLS RETRE ON SPRINGS		Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7		☐ Change	□ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	☐ Delete	TITLE _NAME STREET AODRESS CITY-ST-ZIP	•		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Section 1981 Annual Con-	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Change	Addition
	ertify that the information supplied with to on this report or supplemental report is to poration or the receiver of trustee empoy or on an attachment with agraddress, wi						

DITTELL D

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: