LIMITED LIABILITY COMPANY ANNUAL REPORT 1999			FLORIDA DEPARTMENT OF STATE  Katherine Harris Secretary of State DIVISION OF CORPORATIONS		SECRETARY OF STATE DIVISION OF CORPORATIONS  99 APR -2 PM 1: 43		
ILING F \$ 188.7	FEE Annual Report \$100.0  Make Check Payable				}		
Name a		UMENT			j		
	s n numeron take	02 545			1a. Principal Plac	e of Business	Address
	K.B. ENTERPRISES 762 SOUTH U.S. #1 7ERO BEACH FL 329				762 SOUTH U.S. #1, SUITE # VERO BEACH FL 32962		
Principa	Place of Business	2a. Mailii	2a. Mailing Address			ed or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Ap	Suite, Apt. #, etc			.998	FL Applied For
City & State		City & Sta	City & State			9081	Not Applica
ip Country		7(p	Zip Country		5. Date of Last F	eport	6. Certificate of Status Desir \$8.75 Additional Fee Required
	7. Name and Address of Curre	nt Registered	Agent	B. Name	Name and Address	of New Regis	stered Agent/Office
to register	nt to the provisions of Sections 608.41 ed office or registered agent, or both, in ed agent, and accept the obligations RE	the State of Flo	rida Such change was a	authorized by affirma	itive vote of a majorit	y of the membe	
0, 14.5	(Managing Montes)			000 00000			
MGRM	BROWN, DAVID C		762 SOUTH	. v.s. #1			
					20	DDD2 -04/1 ****	2842562- 6/990109200 188,75 ****188.