## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS 1

DOCUMENT # M72058
1. Corporation Name

KAS ENTERPRISES, INC.

Principal Place of Business Mailing Address					i immidmit til hådtå tidir åmma gität lötr åmmi gibtt marr dimir bigt, mått lægt
BRADENTON FL 34208 B		P. O. BOX 20357 BRADENTON FL 34204			DO NOT WRITE IN THIS SPACE
		US			3. Date Incorporated or Qualifed 03/16/1988
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
26					65-0028702 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired   \$8.75 Additional Fee Required
City & Stat	е	City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip	Country 25	Zip <b>29</b>	Cou 30	ntry	8. This corporation owes the current year Intangible Personal Property Tax.
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Registered Agent
SASEY, KAREN A. 4915 26TH AVENUE, EAST BRADENTON FL 34208				82 Street A	Address (P.O. Box Number is Not Acceptable)
				84 City	FL 85 Zip Code
agent, I a SIGNATURE	Im familiar with, and accept the obligat	ions of, Section 607.0505, Flo	nda Stati	utes.	ration's board of directors. I hereby accept the appointment as registered
12	OFFICERS ANI		13.	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE , NAME STREET ADDRESS	DVP   Sasey, Karen A.   4915 26th ave., East	☐ DELETE	1.1 TF 1.2 N/ 1.3 ST		☐ Change ☐ Addition
CITY-ST-ZIP	BRADENTON FL 34208	<u></u>	1.4 CI	TY-ST-ZIP	
TITLE	P	☐ DELETE	2.1 TI	TLE	Change Addition
NAME STREET ADDRESS			2.2 N/ 2.3 ST	TREET ADDRESS	,
CITY-ST-ZIP	BRADENTON FL 34208		_	TY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME		☐ DÉLETE	3.1 TT 3.2 NV	i	
STREET ADDRESS	(		3.3 S1	REET ADDRESS	
CITY-ST-ZIP				TY-ST-ZIP	Change M Addition
TITLE		☐ DELETE .	4.1 TI	Į.	Change Addition
NAME STREET ADDRESS			4. 2 N 4.3 S1	REET ADDRESS	
CITY-ST-ZIP				TY-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ D€LETE	5.1 Tr 5.2 N		☐ Change ☐ Addition
NAME STREET ADDRESS			5.3 S	TREET ADDRESS	
CITY-ST-ZIP				TY-ST-ZIP	Change 17 Addition
TITLE AST	Į.	☐ DELETE	6.1 TI	ille )	☐ Change ☐ Addition

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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90279 038 \*\*\*150.00