

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 18 PM 4:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M95015

(7)

1. Corporation Name

B.K. POLO OF FLORIDA, INC.

Principal Place of Business

**312 PONCIANA PLAZA
PALM BEACH FL 33480
US**

Mailing Address

**312 PONCIANA PLAZA
PALM BEACH FL 33480
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/19/1988

3a. Date of Last Report

06/23/1994

4. FEI Number

22-2920533

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$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

21 125 WORTH AVE

2a. Mailing Address

26 125 WORTH AVE

Suite, Apt. #, etc.

22 219 SUITE

Suite, Apt. #, etc.

27 SUITE 219

City & State

23 PALM BEACH FL

City & State

28 PALM BEACH FL

Zip

24 33480-4466

County

25 USA

Zip

29 33480-4466

County

30 USA

9. Name and Address of Current Registered Agent

**KELLER, MORRIS
400 SOUTH COUNTY ROAD
PALM BEACH FL 33480**

10. Name and Address of New Registered Agent

81 Name

KELLER, MORRIS

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

125 WORTH AVE SUITE 219

83

84 City

Palm Beach

FL

85 Zip Code

33480-4466

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

Morris Keller (MORRIS KELLER) 4-11-95

(Signature typed or printed name of registered agent first if applicable)

(NOTE: Registered agent signature required when reappointing)

(Date)

12. OFFICERS AND DIRECTORS

TITLE

V

NAME

KELLER, MORRIS

STREET ADDRESS

120 VIA DEL LAGO

CITY - ST - ZIP

PALM BEACH FL

TITLE

P

NAME

KELLER, BONNI

STREET ADDRESS

120 VIA DEL LAGO

CITY - ST - ZIP

PALM BEACH FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

☐ Change ☐ Addition

☐ 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)(b), 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 affidavit with an address.

SIGNATURE:

Morris Keller V.P. (MORRIS KELLER) 4-11-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Signature Number 2