FILE NOW: FILING FEE IS \$61.25 NPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

DOCUMENT #

CITY-ST-ZIP

N9600000173 (2)

K2 PROJECT, INC.

FILED Feb 24 1998 8:00am Secretary of State

Principal Place of Business Malling Address					1 (00)((12) 205 (20) 20((1 00)(Dist Botts Offici Anter 11611 thood iret 1881
		2989 WENTWORTH			3. Date Incorporated or Qualified	
FT. LAUDERALE FL 33332 FT. LAUDERALE FL 33332				01/10/1996		
00					4. FEI Number	Applied For
A 0.1		1.0- 14-90-4-4			65-0642995	Not Applicable
	Place of Business //A	2a. Mailing Address			5. Certificate of Status Desired	See Regulred
Suite, Apt.	#, etc. N/A	Suite, Apt. #, etc.			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State N/A		City & State		7. Is this nonprofit corporation a homeowners association?		
Zin	/A Country	Zip	Country 30	,	8. This corporation owes or has pail Personal Property Tax due June	
24	9. Name and Address of Currer		 		10. Name and Address of New Reg	
<u> </u>			81	Name	NA	<u></u>
REISER, RAYMOND A			82			
1 S.E. 3RD AVE., SUITE 1240						·
MIAMI FL 33131			83	[
			84	City		85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statutes	s, the above	e-named	corporation submits this statement for the p	urpose of changing its registered
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such change was au ations of, Section 617.0503, Flor	ithorized by ida Statute:	y the corp s.	corporation submits this statement for the p poration's board of directors. I hereby accep	t the appointment as registered
SIGNATURE	· · · ·					
12.	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: ID DIRECTORS	Registered Age	ent signatura	required when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDG AND DIDECTORS IN 12
TITLE	PD OFFICERS AIN	DELETE 1.11			Disident	I O Otana a I de divina
NAME			1.2 NAME		President Valdez, Dec Scott 2989 Wentworth	PD LA Change Li Addition
STREET ADDRESS	2989 WENTWORTH		1.3 STREET	ADDRESS	2789 Wentworth	₽ 2な フ.
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-S	T-ZIP	Ft. Landerdole, FL 33	
TITLE	TD	☐ DELETE	2.1 TITLE		Treasurer -	TD Change Addition
NAME	SHAW, PETER		2.2 NAME		Shaw, refer	
STREET ADDRESS	327 LAKECREST CRT FT LAUDERDALE FL		2.3 STREET 2. 4 CITY-1		Shaw, Peter 327 Lakecrest Cvt. Ft. handerdale, FL 3	3326
CITY-ST-ZIP	SD	DELETE	3.1 TITLE	31-211	Secretary -	Change Addition
NAME	SUMPTER, MELANIE	•	3.2 NAME		Secretary Rosie Magnatti 1012 Fairtax Lane F1 hauderdale, FL 3	AD
STREET ADDRESS	1133 FAIRLAKE TRACE APT	2005	3.3 STREET	ADDRESS	1012, Fairfax Lane	222
CITY-ST-ZIP			3.4 CITY-5	ST-ZIP	Ft handerdele, FL	33326
TITLE			4.1 TITLE			Change Addition
NAME CTREET ADORECE			4.2 NAME 4.3 STREET	ANNBECC		402/24
STREET ADDRESS CITY-ST-ZIP	•		4.4 CITY - S	· · · · · · · · · · · · · · · · · · ·		
TITLE		☐ DELETÉ	5.1 TITLE	· · · · · ·		☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP		L Briess	5.4 CITY-S	T-ZIP		C Ohanne C 4 2 des
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME	ADDOCOO		2011/25
STREET ADDRESS			6.3 STREET	AUDHESS:		201105

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. 954-384-5931