

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000028513

1. Entity Name

K & K VENTILATION, INC.

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91236 024 ***150.00

Principal Place of Business

431 NW 52ND ST.
FT. LAUDERDALE FL 33309

Mailing Address

431 NW 52ND ST.
FT. LAUDERDALE FL 33309

658227



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FSI Number

65-0996095

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KADEN, KEITH
431 NW 52ND ST.
FT. LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits 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, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **KADEN, KEITH**
STREET ADDRESS **431 NW 52ND ST.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33309**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/01

Date

(754) 605-7122

Daytime Phone #

CR2E034 (10/00)

To whom it may concern;

Following my conversation this morning with personnel from your office, I was informed to forward this letter describing my situation.

I had mailed my check for the UBR form earlier in the year, but had improper postage and was returned to me, without my acknowledgement, until I had much later reconciled my account and had found this as a old outstanding check.

I am requesting liency from your board. I appreciate your time in this issue and hope it will be resolved without penalization. This was my first year in business and will pay in a timely manor in the future. Please contact me if you have any questions.

I am enclosing a new check for \$150.00 and again appreciate your time.

Sincerely,

Keith Kaden