2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 23, 2004 8:00 am Secretary of State **DOCUMENT # P00000090651** 04-23-2004 90209 021 ***150.00 KWICK-KONTACTS, INC. Principal Place of Business Mailing Address 13948 LAKE GEORGE COURT 13948 LAKE GEORGE COURT **UZUUUTUU** MIAM! LAKES, FL 33014 MIAMI LAKES, FL 33014 (December 3. Mailing Address 15764 Suite, Apt. #, etc. Suite, Apt. #, etc. 03082004 CR2E034 (10/03) Cha-P 4. FEI Number Applied For 65-1043195 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KENDALL, HEATHER Street Address (P.O. Box Number is Not Acceptable) 5764 N.W. Bott 13948 LAKE GEORGE COURT MIAMI LAKES, FL 33014 15764 N.W. okes NEW ADDRESS 8. The above named Inity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete Koudall, Heather Dichange C 15764 N.W 8071 BUR MIAMI LAKES I-L 33016 TITLE TITLE KENDALL, HEATHER NAME NAME Olaruge STREET ADDRESS 13948 LAKE GEORGE COURT STREET ADDRESS affron yo MIAMI LAKES, FL 33014 CITY-ST-ZIP CITY-ST-ZIP D ☐ Addition ☐ Delete TITLE TITLE MIZZELL, MARY H NAME NAME STREET ADDRESS STREET ADDRESS 924 RAVEN AVE CITY-ST-ZIP MIAMI SPRINGS, FL 33166 CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete NAME: NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an appress, with all other like empowered. EATHER KENDALL SIGNATURE: