772 860.9742

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

SIGNATURE:

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)						FILED Jul 21, 2003 8:00 am Secretary of State		
DOCU 1. Entity Nam KINDERC	ne	0053973) 	07-21-2003 903	•	
Principal Place of Business 9340 CARLTON RD 9340 CARLTON PORT ST LUCIE FL 34987 Mailing Address 9340 CARLTON PORT ST LUCIE			167				. 	
	lace of Business	3. Mailing Address			-			
Suite, Apt.		Suite, Apt. #, etc. City & State			CHECK HERE IF MAKING CHANGES 4. FEI Number CE CORREA Applied For			
Zip Country		Zip	Country		 	ficate of Status Desired	\$8.75	Not Applicable Additional
		<u></u>			<u> </u>		Fee Req	
6. Name and Address of Current Registered Agent				Name	7. Nam	e and Address of New Rec	jistered Agent	
HERNDON, BIRAN C EA 8507 PENNY LANE			}		(P.O. Box Number is Not Acceptable)			
FORT PIERCE FL 34951								
5				City FL Zip Code				
	named entity submits this statement for ions of registered agent. Note: The statement of the statement for ions of the statement of the state	<i>γ</i> λ		d office or registe			ia. I am familiar w	ith, and accept
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State						9. Election Campaign Finar Trust Fund Contribution.	_	5.00 May Be ided to Fees
10.	OFFICERS AND		11.		ADDITI	ONS/CHANGES TO OFFIC		
NAME STREET ADDRESS CITY-ST-ZIP	KINDER, CHERYL 9340 CARLTON RD PORT SAINT LUCIE FL 34987	☐ Delete					☐ Chan	ge [] Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KERN, DAVID 9340 CARLTON RD PORT SAINT LUCIE FL 34987	☐ Delete		ſ			☐ Chan	ge 🗍 Addition
NAME STREET ADDRESS CITY-ST-ZIP		Delete		T ADDRESS ST-ZIP			. Chang	ge Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP			Chang	ge Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	☐ Delete	TITLE NAME STREE	T ADDRESS			☐ Chanç	ge Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREE				☐ Chang	ge Addition
indicated of the cor	ertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo or on an attachment with an address, w	true and accurate and that wered to execute this repor	my signatu t as require	ire shall have the	same legal	effect as if made under oat	h∵that Lam an offic	cer or director