2002 UNIFORM BUSINESS REPORT (UBR)

2002	2 UNIFORM BUSI	NESS REPO	,)RT (UBR	3)	FII Mar 12, 2	LED 2002 8	R:00 am
DOCUMENT # P01000102074 1. Entity Name					Secretary of State 02-06-2002 90041 002 ***150.00		
K&AVE	NTURES, INC.	\bigvee			02-00-2002 90	041 002	130.00
Principal Plac		Mailing Address 15106 HERON GLEN DRI	VE.			7	
Ullimit W	NewAddre	ss					
106 E.B. Suite, Apt.		3. Mailing Address 106 E. Bloom: a Suite, Apt. #, etc.	gdale.Avenu	DO NOT WRITE IN THIS SPACE			
City & State	e	Bign don	a		El Number 59-3754439	— — — —	plied For t Applicable
33511	Country Hillsbackgh	335(1	Country 1+:11sbo rov	7ri	Certificate of Status Desired dame and Address of New Registered	\$8.75 Addi Fee Required	
Name y e another 1 e costs							
LEWIS, KENNETH L Street Address (15106 HERON GLEN DRIVE				dress (P.O. B	ox Number is Not Acceptable)		
					sleton Drive	- Zin Code	
City Brandon FL Zip Code 3511							
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE Signature, hypotor printed name of registered agent and title if applicable. (NOTE: Registered form signature states) DATE							
Tax filing i	pration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW After May 1, 20	III FEE IS \$150.0 002 Fee will be \$50 oble to Department	50.00	Election Campaign Financing Trust Fund Contribution.		O May Be to Fees
11.	OFFICERS AND D		12.		DITIONS/CHANGES TO OFFICERS AN		
NAME STREET ADDRESS CITY-ST-ZIP	D Lewis, Kenneth L 15106 Heron Glen Drive Lithia Fl 33547	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		5. Kenneth L, sieton Drine Vico don. FL 33511	besign	R2E034 (9/01
TITLE	Estilor FE 33041	☐ Delete		Lewis	Angela, Presiden	√+□ Change	Addition &
NAME STREET ADDRESS			NAME STREET ADDRESS	7547	Angela, thesiden Esieton Drive Jon, FL 38511		
CITY-ST-ZIP			CITY-ST-ZIP	Brane	300, FL 33511	Change	Addition
NAME "STREET ADDRESS"			NAME STREET ADDRESS	·			
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE NAME		☐ Delete	TITLE NAME			☐ Change	Addition {
STREET ADDRESS CITY+ST+ZIP			STREET ADDRESS CITY-ST-ZIP				
TITLE		☐ Delete	TITLE NAME	·-		☐ Chaпge	Addition
NAME STREET ADDRESS			STREET ADDRESS CITY-SI-ZIP				
CITY-ST-ZIP		☐ Delete	TITLE			☐ Change	Addition
NAME STREET ADDRESS		•	NAME STREET ADDRESS				
CITY-ST-ZIP		Note the state and the	CITY-ST-ZIP	d in Section	110 07/3)(i) Florida Statutas I further as	ertify that the int	formation
indicated of the cor	certify 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 signature snail na t as required by Char				