

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2004 8:00 am
Secretary of State

02-27-2004 90035 036 ***150.00

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02192004 Chg-P CR2E034 (10/03)

4. FEI Number 22-3873629 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DOCUMENT # P02000088379

1. Entity Name
K & M REALTY INVESTMENTS AND CONSTRUCTION,
CO.

Principal Place of Business
225 N.E. MIZNER BLVD., #300
BOCA RATON, FL 33432

Mailing Address
225 N.E. MIZNER BLVD., #300
BOCA RATON, FL 33432

2. Principal Place of Business
1919 N State Rd 7

3. Mailing Address
1919 N State Rd 7

Suite, Apt. #, etc.
204

Suite, Apt. #, etc.
204

City & State
Margate Florida

City & State
Margate Florida

Zip 33063 Country USA

Zip 33063 Country USA

TILLMAN, WILLIAM K
8306 NW 38TH ST
CORAL SPRINGS, FL 33065

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME TILLMAN, WILLIAM K
STREET ADDRESS 8306 NW 38TH ST
CITY-ST-ZIP CORAL SPRINGS, FL 33065 ☐ Delete

TITLE P
NAME Tillman, William K
STREET ADDRESS 1919 N State Rd 7 Suite 204
CITY-ST-ZIP Margate Florida 33063 ☒ Change ☐ Addition

TITLE V
NAME LUPTON, MATTHEW C
STREET ADDRESS 225 N.E. MIZNER BLVD., #300
CITY-ST-ZIP BOCA RATON, FL 33432 ☐ Delete

TITLE V
NAME Lupton, Matthew C
STREET ADDRESS 1919 N State Rd 7 Suite 204
CITY-ST-ZIP Margate Florida 33063 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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 address, with all other like empowered.

SIGNATURE: Matthew Lupton Matthew Lupton

Date 2-25-04 Daytime Phone # 954-978-9911