

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90145 048 ***150.00

DOCUMENT # P93000016930

1. Entity Name
K & E ENTERPRISES, INC.

Principal Place of Business

13245 62ND ST NO
CLEARWATER FL 34620
US

Mailing Address

13245 62ND ST NO
CLEARWATER FL 34620
US

2. Principal Place of Business

9221 54TH ST NORTH

Suite, Apt. #, etc.

3. Mailing Address

9221 54TH ST NORTH

Suite, Apt. #, etc.

City & State

PINELLAS PARK

Zip
FLORIDA

Country

FLORIDA

City & State

PINELLAS PARK

Zip

33782

Country

FLORIDA

4. FEI Number

59-2552096

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BROWN, KEVIN J.
13245 62ND ST NO.
CLEARWATER FL 34620

7. Name and Address of New Registered Agent

Name

KEVIN J. BROWN

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

9221 54TH ST NORTH

City

PINELLAS PARK

FL

Zip Code

33782

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]

KEVIN J. BROWN

02-26-02

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, 2002 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 **PS** ☐ Delete
NAME **BROWN, KEVIN J**
STREET ADDRESS **13245 62 ST NO**
CITY-ST-ZIP **CLEARWATER FL**

TITLE **VPT** ☐ Delete
NAME **BROWN, EDWARD J.**
STREET ADDRESS **13245 62 ST NO**
CITY-ST-ZIP **CLEARWATER FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
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
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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]

KEVIN J. BROWN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-26-02 127545-4336

Date

Daytime Phone #

CR2E034 (9/01)