## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretally of State
DIVISION OF CORPORATIONS

9221 N.W. 32nd Manor

Sunrise Fl 33351

DOCUMENT # P93000021835
1. Corporation Name

9221 N.W. 32nd Manor

Sunrise, Fl 33351

KGS ENTERPRISES INC

Total Barrier Barrier

99 MAR -4 AM 11: 57

SECHLIANY OF STATE TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

ł				3. Date Incorporated or Qualifed			
2.	, Principal Place of Business	2a. Mailing Addre		April 1, 1993 65-0405515	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #.	etc.	5. Certificate of Status Desired [1	\$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
24	Zip Country 25	Zip 29	Country  [30]	This corporation owes the current yea     Personal Property Tax	r Intangible <b>K</b> ∐Yes ∭No		
	office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation	1 Acct In (202	82 Stree  83  84 City  Ta Statutes, the above name ge was authorized by the core	2 Street Address (P.O. Box Number is Not Acceptable)  4 City  FL   85   Zip Code  we named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered			
	Signature, typed or pointed name of registered ager		(NOTE Registered Agent segnature		and the second second second		
1	2. OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	and the second of the second of the second		
m	ne President (D)	□ DE	ELETE 11 TITLE	سان راستان راستان راستان راستان راستان راستان	[]Change []Addition		
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NAME	Kendall G. Wagner		12 NAME		-03/10/99 - (	17000	040
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CITY-ST-ZIP	Sunrise F1 33351		14 CiTy+ST-Zi₽	l	****130.00	**************************************	50.00
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NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
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NAME	}		4 2 NAME				
STREET ADDRESS			43 STREET ADDRESS				
CITY-ST-ZIP	<u> </u>		4.4 CITY ST-ZIP				
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NAME		1	62 NAME				
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			C 4 C170/ ST 710				

14. 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 annual report is superemental annual 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 of the report are the reported to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on a place of the corporation of

SIGNATURE:

KENDALL G. WAGNER JR

3/2/99

984-249-628-5

CR2E034 (11/98)