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

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secrefary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000047341 (1)

FILED Mar 17 1998 8:00am Secretary of State

KISBY ENTERPRISES, INC.								
Principal Place of Business Mailing Address							ABA NUUSU IIIII	(1011 U 100
12419 KINGS HIGHWAY 12419 SW COUNTY F LAKE SUZY FL 33821 LAKE SUZY FL 34280						DO NOT WRITE IN THE	P CDACE	
		US				3. Date Incorporated or Qualified	S SPACE	
						06/28/1993		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21 12419 3W COUNTY RD 769 26						65-0424240		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, et							\$8.75	Additional
	B 2rsh	27	<u></u>			5. Certificate of Status Desired	Fee	Required
City & State	City & State	k State			6. Election Campaign Financing		May Be	
20	2015 Country	26 Country				Trust Fund Contribution		d to Fees
	SCHOOL COUNTRY	Zip 29	-,			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	9, Name and Address of Current F		[30]			10. Name and Address of New Registere		
LIC.				81	Name			
KISBY, ROY A 12419 SW COUNTY RD #769				1	Direct Later	- /0 o B - W - 1 - 1 - 1 - 1 - 1 - 1 - 1		
LAKE SUZY FL 34266				82 Street Address (P.O. Box Number is Not Acceptable)				
				83				
				84	City		. 85 Zij	p Code
						F		
11. Pursuant	to the provisions of Sections 607.0502 a	ind 607.1508, Florida Statut	es, the al	ove	-named corp	oration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing	its registered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Flo	orida Stat	utes.	tile corporati			
SIGNATURE	R. a. Kisky						3/11/98	<u> </u>
12,	Signature, typod or printed name of registered agent a OFFICERS AND I		13.	d Agen	nt signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AF	NO DIRECTO	78S IN 12
TITLE	D	DELETE	1.1 TO	TLE		ADDITIONS/OFFARIAGES TO OFFICERS AF	Change	
NAME	KISBY, ROY A		1.2 NA	AME			•	
STREET ADDRESS	A STATE OF STATE OF THE STATE O		1.3 ST	REET	ADDRESS .			ļ
CITY-ST-ZIP	ROTUNDA WEST FL 33947		1.4 CI	TY-ST	- ZiP			!
TITLE	D	☐ DELETE	2.1 TI	TLE			Change	Addition
NAME	KISBY, JOY		2.2 NA	ME	ĺ	•		
STREET ADDRESS	13 BUNKER PLACE			REET A	ADDRESS			
CITY-ST-ZIP	ROTUNDA WEST FL		_	2.4 CITY - ST - ZIP			По	
TITLE		DELETE	3.1 TII				Change	Addition
NAME CTOSET ADDRESS			3.2 N/		,DD00000			}
STREET ADDRESS				HEET A	ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.1 10		1-211		Change	Addition
NAME			4. 2 N	-	1			
STREET ADDRESS			1		ADDRESS			
CITY-ST-ZIP				TY-ST				
TITLE		DELETE	5.1 Til	$\overline{}$			Change	Addition
NAME			5.2 NA	ME				ļ
STREET ADDRESS			5.3 ST	REET A	ADDRESS			
CITY-ST-ZIP			5.4 CI		- ZIP			
TITLE		☐ DELETE	6.1 TIT	LE			Change	Addition
NAME			6.2 NA					}
STREET ADDRESS			•		ADDRESS			
CITY-ST-ZIP	ertify that the information supplied with	this filing does not qualify fo	6.4 Cit			Section 119.07(3)(i). Florida Statutes. I further	certify that th	ne information
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Indicated on this annual report or supplemental 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 or the receiver or trustee empowered 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 an attachment with an address.

SIGNATURE:

MARCH 6 1998

911-629-2889