PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000047341 1. Corporation Name

KISBY ENTERPRISES, INC.

Principal Place	e of Business	Mailing Address				I ISOUROUS LITE TO LOS I FISHE BOLLI GODILE	38 151 50 111 3	1 2 51 (8858 1)	ICI GIDA S ILDI \$ 01 1
12419 KINGS HIGHWAY 12419 SW COUNTY RD (LAKE SUZY FL 34266-5974 LAKE SUZY FL 34266-5974									
US US						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed		•	
						06/28/1993			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number			Applied For
21		26	26			65-0424240		1	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required				
City & Stat	e	City & State				Election Campaign Financing Trust Fund Contribution			May Be
Zip	Country	Zip	Cou	intry	,	8. This corporation owes the curren	ıt vear Inta	angible	4
24	25	29	30	•		Personal Property Tax.	,	Yes	□No
	9. Name and Address of Curr	1=-1	1001	Т		10. Name and Address of New Re	gistered /	Agent	
-				81	Name			- 3	
KISB	IY, ROY A			L					
12419 SW COUNTY RD #769				82	Street Ad	dress (P.O. Box Number is Not Acceptable	le)		
LAKE SUZY FL 34266									
				83					
				84	City	•		85 Zij	o Code
44 5				ᆜ		rporation submits this statement for the po	<u> </u>	-6	4
office or r	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered a	e of Florida. Such change v gations of, Section 607.0505	was authorized 5, Florida Stat	d by utes	the corpora	tion's board of directors. I hereby accept	the appoir	ntment as	registered
12.		AND DIRECTORS	13.	, Agai	it a-griature requ	ADDITIONS/CHANGES TO OFFI		D DIRECT	ORS IN 12
TITLE	D	DELE1		TLÉ				Change	
NAME	KISBY, ROY A		1.2 N						_
STREET ADDRESS	13 BUNKER PLACE		-		T ADDOECC				•
·				1.3 STREET ADDRESS 1.4 CITY-ST-ZIP					
CITY-ST-ZIP	ROTUNDA WEST FL 33947	[7] DELET			I-ZIP			☐ Change	e
TITLE	D NORY IOV	□ DELE						□ Cilarigi	Addition
NAME	KISBY, JOY		2.2 N						
STREET ADDRESS	13 BUNKER PLACE				TADORESS				
CITY-ST-ZIP				2.4 CITY-ST-ZIP				F 1 01	
TITLE		☐ DELET						Change	e
NAME			3.2 N			•			
STREET ADDRESS			3.3 \$1	TREET	TADORESS				
CITY-ST-ZIP				ITY-\$	T-ZIP				
TITLE		☐ DELET	TE 4.1 TI	TLE				☐ Change	Addition
NAME			4.2 N	AME					
STREET ADDRESS			4.3 ST	TREET	TADDRESS			0	
CITY-ST-ZIP			4.4 CI	TY-S	T-ZIP				
TITLE	<u> </u>	□ DELET						☐ Change	a ☐ Addition

CITY-ST-ZIP 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 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, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90049 022 ***150.00

Addition

☐ Change