

4/24/98 B-5478 C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000050326 (6)

1. Corporation Name

KEMO ENTERPRISES, INC.



Principal Place of Business

Mailing Address

1515 N. FEDERAL HIGHWAY
STE #314
BOCA RATON FL 33432
US

1515 N. FEDERAL HIGHWAY
STE #314
BOCA RATON FL 33432
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/19/1993

4. FEI Number

65-0424365

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

21 Kemo Enterprises, Inc.

2a. Mailing Address

26 1515 N. Federal Hwy.

Suite, Apt. #, etc.

22 Suite #309

Suite, Apt. #, etc.

27 Suite #309

City & State

23 Boca Raton, FL. 33432

City & State

28 Boca Raton, FL. 33432

Zip

24 33432

Country

25 USA

Zip

29 33432

Country

30 USA

9. Name and Address of Current Registered Agent

SCHNEIDER, HARVEY R.
1900 CORPORATE BLVD NW
STE 301 WEST BLDG
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME MOTO, KEMAL
STREET ADDRESS 1515 N FEDERAL HWY, #314
CITY-ST-ZIP BOCA RATON FL

TITLE VP ☐ DELETE

NAME MOTO, ENISE
STREET ADDRESS 1515 N FEDERAL HWY, #314
CITY-ST-ZIP BOCA RATON FL

TITLE T ☐ DELETE

NAME AKDAG, MENDO
STREET ADDRESS 1515 N FEDERAL HWY, #314
CITY-ST-ZIP BOCA RATON FL

TITLE VP ☐ DELETE

NAME MOTO, CIGDEM
STREET ADDRESS 1515 N FEDERAL HWY, #314
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

1515 N. Federal Hwy., Suite #309
Boca Raton, FL. 33432

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

1515 N. Federal Hwy., Suite #309
Boca Raton, FL. 33432

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

1515 N. Federal Hwy., Suite #309
Boca Raton, FL. 33432

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

1515 N. Federal Hwy., Suite #309
Boca Raton, FL. 33432

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

1515 N. Federal Hwy., Suite #309
Boca Raton, FL. 33432

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

1515 N. Federal Hwy., Suite #309
Boca Raton, FL. 33432

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.

CR2E034 (10/97)