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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1	9	9	7

DOCUMENT # P93000055709 Kiess, Inc. 741 NW 65 Arenue Plantation, FL 33317

Principal Place of Business

Mailing Address

Kiess, Inc.

741 NW 65 Avenue Plantation FL 22217

		1 23311							08/04/93	- {	
2. Principal Place of Business		28	2a. Mailing Address		4.	FEI Number 25-0442544		Applied For			
21	21			6			<u>(</u>	Not Applicable			
22	Suite, Apt #, etc		27	Suite, Apt. #, etc.		5.	Certificate of Status Desired		\$8.75 Additional Fee Required		
23			28	City & State		,		1	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
24	Zŧp	Country 25	29	Zip	C₀ 30	untry			This corporation has liability for Florida Statutes		ile tax under s. 199.032. XI No
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
	Mark Kies	ં				81	Name				
	741 NW 4					82	Street Addre	ess (P.	O. Box Number is Not Accepta	ble)	
•	Plantation	1, FL 33317				83					
						184	Citv				85 Zin 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 for 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 (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. President □ DELETE TITLE 1.1 TITLE Change Mark Kiess NAME 1.2 NAME 741 NW 65 Avenue STREET ADDRESS 1.3 STREET ADDRESS Plantation FL 33317 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 21 TITLE Change Addition Vice President Lawra Kiess 741 NW 65 Avenue NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS Plantation, FL 23317 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - \$1 - ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST- ZIP 4.4 CITY - ST- ZIP DELETE TITLE 5.1 TOTLE Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST- ZIP Change DELETE Addition TITLE 61 TITLE 700002189857 -05/23/97--01058--033 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS \*\*\*165.00 6 4 CITY - ST - 7IF with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the poplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that 14. I do hereby certify that the information supor-

SIGNATURE:

information indicated on this annual regular an an officer or director of the corporations in Block 12 or Block 13 if charge

NTED NAME OF SIGNING OFFICER OR DIRECTOR

the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name on an attachment with an address.

Daytime Phone #

May 13 1997 8:00an

Secretary of State

3a. Date of Last Report

3. Date Incorporated or Qualified