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

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

"Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000082262 (5)

FILED Jun 19 1998 8:00am Secretary of State

K & E ENTERPRISES, INC. Principal Place of Business Mailing Address 11885 BIRCH ST. 11885 BIRCH ST. PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/22/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0448802 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be П Added to Fees Trust Fund Contribution 23 Zin Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Properly Tax due June 30. Yes Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HERNANDEZ, EDGARD 11885 BIRCH STREET 82 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH GARDENS FL 33410 83 City 84 Zip Code F 1008, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered action 1920,0505, Florida Statutes. 11. Pursuant to the provisions of Sections 607 0502 and office or registered agent. SIGNATURE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE PARCIDENT 1.1 TITLE HERNANDEZ, EDGARD NAME 1.2 NAME 11885 BIRCH ST. STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH GARDENS FL 33410 CITY-ST-ZIP 1.4 CHY+ST-ZP DELETE Change Addition TITLE 2.1 1111 6 FRANCISCO LISCANO RESIDENT NAME 2.2 NAME CARACAS, UENEZUELA STREET ADDRE 2.3 STREET ADDRESS HORNO NEGRO A COCHERA CITY-ST-ZIP 2 4 CITY - ST-7IP res paroue el deleite DELCTE Change Addition 3.3 THT & NAME APT: 23 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-7IP DELFTE Change Addition TITLE 4.1 THILE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 C(1Y - ST - Z(P) CITY-ST-ZIP Change Addition DELETE TITLE 5.1 1111.8 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CHTY-ST-ZIP 54 CITY-S1-ZIP DETETE Change Addition TITLE 6.1 THEE 800002567538 NAME 6.2 NAME -06/22/38--01044--013 ***150.00 STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CHY - ST - ZIP

14. Thereby 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 oalh; that I am an officer or director of the corporation of the neglect or trustee emperied to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if charged or on producing the highest part of the corporation of the neglect o

4-30-98 561-627240