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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE

13



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Mar 31 1998 8:00am

Secretary of State

3/24/92

/パハ フィンニ レバタフ

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400035057 (6)

KENT GROUP ENTERPRISES, INC.

Principal Place of Business Mailing Address 243 W. INDIANTOWN ROAD 243 W. INDIANTOWN ROAD JUPITER FL 33458 JUPITER FL 33458 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/02/1994 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 26 Not Applicable 65-0494510 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHROEDER, NORMAN L II 101 N J STREET Street Address (P.O. Box Number is Not Acceptable) SUITE 1 83 LAKE WORTH FL 33460 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, typed or printed name of registered agent and tills if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE ☐ Change Addition President Robert & Sandbery 276 Julia Circle HOBSON, PAUL NAME 1.2 NAME 214 SHOREWOOD WAY 1.3 STREET ADDRESS STREET ADDRESS Jupiter fl wpitu FL 33418 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE HOBSON, BARBARA NAME 2.2 NAME 214 SHOREWOOD WAY STREET ADDRESS 2.3 STREET ADDRESS Jupiter Fl 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition COLE, MARTY N. 3.2 NAME 9183 S.E. DEERBERRY PLACE 3.3 STREET ADDRESS STREET ADDRESS **TEQUESTA FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY - ST - ZIP ☐ DELETE 5.1 TITLE Change ■ Addition TITLE MAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City - ST - ZIP DELETE Change Addition 61 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CiTY-ST-ZIF 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 arinual 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