## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## P94000044371 **DOCUMENT #**

1. Entity Name

K.D.M. ENTERPRISES, INC.



## **FILED** Feb 06, 2003 8:00 am Secretary of State 02-06-2003 90078 002 \*\*\*150.00

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Principal Pla	ce of Busines	S	Maili	ng Address			7					
7118 MONTRICA DR				7118 MONTRICO DRIVE								
UNIT 3C, BLDG, 16			UNIT	UNIT 3C. BLDG. 16								
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2. Principal	Place of Busir	ness		3. Mailing Address								
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Zip Country		Country	Zíp		Countr						lot Applicable	
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6. Name and Address of Current Registered Agent							<del></del>			ee Require	ed	
	o. Hame	and Address of Carl	ent negister	eo Agent		Name	7. NE	ame and Address of New Re	egistered A	<u>jent</u>		
MINIKINI K	/ENNETH	_				Name		ı				
MINKIN, KENNETH						Street Address	(P.O.:Bō	x Number is Not Acceptable)				
	ntrico dr				L							
BOCA RA	TON FL 334	133										
					L	City				Τ		
					[	City			FL	Zip Cod	de	
8. The above	named entity	submits this statemer	nt for the purp	oose of changing its	reaistered	office or registe	ered ager	nt, or both, in the State of Flori	ida Iam fa	miliar with	and accept	
the obliga	tions of regist	ered agent.		3 3					ida. Tamia	Tuncai With,	and accept	
•												
SIGNATURE	Signature typed	or printed name of registered a	gont and title if any	aliashla (NOTE	5. Be aless and			<del></del>				
			gent and title it app	MCADIE. (NOTE	:: Registered A	lgent signature required	d when reins	stating)	DATE			
		! FEE IS \$150.00										
		3 Fee will be \$550.						<ol><li>Election Campaign Fina Trust Fund Contribution.</li></ol>	~ —	\$5.0	May Be	
Make Check	k Payable to	Florida Departmen	nt of State	ļ				rusi runa Contribution.		Added	d to Fees	
10.		OFFICERS A	ND DIRECTO	PRS	11.		ADD	TIONS/CHANGES TO OFFIC	CERS AND D	DIRECTOR'	S IN 11	
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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 report or supplemental 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 10 or Block 11 if chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE: