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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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Secretary of State

(96/6)

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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SIGNATURE:

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K & T OF ORLANDO, INC.

Principal Place of Business Mailing Address 2000 GERONIMO TRAIL 2000 GERONIMO JUAN. MAITLAND FL-42751 MAITLAND FL 32751-3726 3. Date Incorporated or Qualified 3a. Date of Last Report 07/08/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 2621 S. SANFORD AVE 26 59-3257268 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired SUITE Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be = SANFORD Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible ta under s. 199.032, 25 S.R.MINULE Yes 29 Florida Statutes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TAYLOR, ERIC C 2060 GERONIMO TRAIL 82 Street Address (P.O. Box Number is Not Acceptable) MAITLAND FL 32751 63 84 City 85 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. Thereby accept the appointment as registered agent. Lam fam fam fam with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when roinstating) DATE bligentine it go it to i printed timble of respict to diagonical differil applicable. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. DELETE Change Addition 1.1 TITLE THEF TAYLOR, ERIC C NAVE 1.2 NAME 2060 GEROMNIMO TR 1.3 STREET ADORESS STREET ADDRESS MAITLAND FL 14 CITY - ST-ZIP GHY - ST - 76 Addition DELETE Change 21 TITLE III;f **VP** KELEHER, THOMAS G 2.2 NAME MALE 341 FERDINAD DR STEEL LADORESS 2.3 STREET ADDRESS LONGWOOD FL CHY-51 Z0 2. 4 City - ST - ZiP DELETE Change Addition 3.1 TITLE THLE 3.2 NAME NAME 3.3 STREET ADDRESS STEEL! ALORES! £:TY - \$1 - 70 3.4 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE THUS 4 2 NAME NAM STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - \$1 - ZIP CHY-ST-ZIP DELETE 51 TITLE Change ___ Addition DILLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP COLY- \$1, 76 ___ Add tion DELETE Change TITLE 6.1 THLE 6.2 NAME NaMi STREET ACTIVITIES 6 3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-5" ZPI 14. I do 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 eath; 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.