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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000088498 (8)

1. Corporation Name

KAJI ENTERPRISES, INC.



Principal Place of Business

Mailing Address

801 WESTMORELAND LANE  
CANTONMENT FL 32533

801 WESTMORELAND LANE  
CANTONMENT FL 32533

3. Date Incorporated or Qualified

01/01/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KULAS, KENNETH K  
801 WESTMORELAND LANE  
CANTONMENT FL 32533

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

KENNETH K. KULAS

☐ DELETE

PRESIDENT

801 WESTMORELAND LANE

CANTONMENT, FL 32533

TITLE NAME STREET ADDRESS CITY-ST-ZIP

ARTHUR R. NELSON JR.

☐ DELETE

VICE PRESIDENT

305 W. ORANGE AVE.

FOREY AL., 36536

TITLE NAME STREET ADDRESS CITY-ST-ZIP

JESSE G. DRUGHON

☐ DELETE

SECRETARY/TREASURER

6134 PAIN AVE.

PENSACOLA, FL 32526

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Kenneth K. Kulas*

KENNETH K. KULAS, PRES.

11 APR 96

(904) 968-4591

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

De-time Phone

CR2E034 (12/95)