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

PROFIT CORPORATION ANNUAL REPORT

**1998** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000022174 (3)

M F V & K ENTERPRISES, INC.

MCKINNEY, REX

VERHOFF, JIM

EL DORADO KS 67042

110 INDUSTRIAL DR.

FULTON MO 65251

KLEBBA, ROBERT

9219 MAGIC MT. DR.

CHATTANOOGA TN 37421

RR#1

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

TITLE

NAME

TITLE

NAME Street address

TITLE NAME

Principal Plac	e of Business	Mailing Address				
		5805 SCHOONER WAY TAMPA FL 33615	WAY		DO NOT WRITE IN THE	S SPACE
	_				3. Date Incorporated or Qualified 03/17/1995	
2. Principal P	2a. Mailing Address	g Address		4. FEI Number	Applied For	
21		26	26		59-3303542	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u>├</u>		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	-¬ ´		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the o	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
O'CONNOR, PATRICK M PATEL, MOORE & O'CONNOR, P.A18167-U.S. HIGHWAY 19 NORTH, SUITE 481 -CLEARWATER FL 34624				81 Name 82 Street Add 22 YO 83 84 City Clearu	ress (P.O. Box Number is Not Acceptable)  Belleair Rd, Ste 160	85 Zip Code 3.376.4
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, typod or printed name of registered agent and title if applicable (NOT) Registered Agent signature required when reinstalling)  DATE						
12.			13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DP	☐ DELETE	1,1 TI	ILE		Change  Addition
NAME	FOX, JEFFREY M		1.2 N	ME		
STREET ADDRESS	RESS 8805 SCHOONER WAY 1.33		REET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33615		1.4 0	TY-ST-ZIP		
TITLE	V	DELETE	2.17/	n c	···	Change Addition

2.2 NAME

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DÉLETE

DELETE

DELETE

2.3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY - ST - ZIP

3.4. CITY - ST - ZIP

2. 4 CiTY - ST - ZIP

64 CITY-S1-ZIP

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 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.

Who lan

012-02-022

Change

Change

Change

Change

**FILED** 

Apr 17 1998 8:00am

Secretary of State

R2E034 (10/97)

Addition

Addition

\_\_\_ Addition