## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000028383 (4)

## FILED Sep 17 1997 8:00am Secretary of State

KENYO	ON ROLLERS, INC. OF TA	MPA BAY							
Principal Place of Business Mailing Address						100/HP0  114 10140 01110 48/H) 80/H  70		(40)   <b>6100</b>   (4   <b>60</b>	
26941 DEAC ZEPHYRHILL			26941 DEACON LOOP ZEPHYRHILLS FL 33544						
						DO NOT WRITE			
						3. Date Incorporated or Qualified	3a. Date of Las	•	
9 Oringinal F	Place of Business	On Mallin Adding			04/10/1995	08/09/1996			
	race of business	28. Mailing Address			4. FEI Number	Applied 1 of			
21 Suite, Apt.	# otc	Suite, Apt. #, etc.			59-3315084	Not Applicable			
22 City & State		27				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
23	l <del>e</del>	City & State			6. Election Campaign Financing \$5.00 May Be				
Zip	Country	[28]				Trust Fund Contribution Added to Fees			
24			<del> </del>	Country		8. This corporation owes or has paid the current year Intangible			
24			29 30			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
9, Name and Address of Current Registered Agent					Vame	IV. Name and Address of New Megistered Agent			
KENYON, BRIAN S									
26941 DEACON LOOP ZEPHYRHILLS FL 33544				<b>B2</b> S	Street Address (P.O. Box Number is Not Acceptable)				
ZETTINIILLO PL 33344				83					
				84 (	City		FL 85 2	Zip Code	
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.0 registered agont, or both, in the Sta or familiar with, and accept the ob-	1502 and 607,1508, Florida Ste ale of Florida. Such change we lightions of Section 607,0505,	pove-n d by th utes.	amed corpor e corporation	ration submits this statement for the pun's board of directors. I hereby accept	irpose of changing the appointment			
SIGNATURE	Signature, typed or printed name of registered	agent and title it applies to the . (f	NOTE: Registered	Agent s	ignature required	when reinstating)	7-/5'-9' DATE	<b>-/</b>	
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	RS AND DIRECT	TORS IN 12	
TITLE	D	☐ DELFTE	1.1 (0	LE			☐ Chan	ige 🔲 Addition	
NAME	KENYON, BRIAN		1.2 NAME						
STREET ADDRESS	26941 DEACON LOOP	1.3 ST		REET ADO	DRESS				
CITY-ST-ZIP	ZEPHYRHILLS FL 33544			1.4 CHY-ST-ZIP					
TITLE	DFLETE		2.1 ТІТ	2.1 TITLE			☐ Chan	nge 🔲 Addition	
NAME	•		22 NAME						
STREET ADDRESS			2.3 STREET ADDRESS		DRESS				
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		IP .				
TITLE		☐ DELETÉ					Chang	ge 🔲 Addition	
NAME			3.2 NAME					1	
STREET ADDRESS				reet ado				İ	
CITY-ST-ZIP			1Y - ST - Z	IP .					
TITLE		☐ Detter	4.1 111				Chang	ge L Addition	
NAME STOCET ADDRESS			4. 2 NA						
STREET ADDRESS				REET ADD	- 1				
CITY-ST-ZIP TITLE		DELETE		4.4 CITY-ST-ZIP			Chan	an I Addition	
NAME		E PERIL		5.1 TITLE 5.2 NAME			☐ Chang	ge 🔲 Addition	
STREET ADDRESS					NDE CO			]	
CITY-ST-ZIP		·		REET ADD					
TITLE		☐ DELETE	5.4 UII 6.1 TITI	Y-ST-ZI	r		Chanc	ge Addition	
NAME		□ pricit	6.1 HU				Ch chaut	Pe T VOINICION	
STREET ADDRESS					MECC			į	
			•	REET ADD					
14. I do heret	ov certify that the information suppl	lied with this filing does not au		Y-ST-ZI		Section 119.07(3Vi) Florida Statutes	I fourther eastiful	hol the	

I for 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.