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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000043940 (2)

KWP FLORIDA 2005, INC.

FILED Feb 18 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address					
302 LEE BLVD SUITE 102 LEHIGH ACRES FL 33936		302 LEE BLVD SUITE 102					
		LEHIGH ACRES FL 33936		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified	0 017101	
					06/07/1995		
9 Principal Pl	lace of Business	2a. Maijing Address			4. FEI Number	7 7	Applied For
21		143 Nirror Lo	Suite, Apt. #, etc.		65-0583463	─	Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.		, .			Additional
22		27 Lehigh Au	res.	FL	5. Certificate of Status Desired		Required
City & State	0	City & State		<u></u>	6. Election Campaign Financing	\$5.0	O May Be
23		28			Trust Fund Contribution		d to Fees
Zip	Country	Zip 72(02/	Countr	YIICA	8. This corporation owes or has paid the	current year l	
24	25	29 25 75	30	USIT	Personal Property Tax due June 30.	Yes	□ No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registers	d Agent	
MO	RGAN, JOHN M		81	Name			
302 LEE BLVD SUITE 102			82 Street Addr		ess (P.O. Box Number is Not Acceptable)		
LEH	HIGH ACRES FL 33936			<u> </u>			
			83	Ì			
			64	City		. 85 Zi	p Code
				'		L]	
11. Pursuant t	to the provisions of Sections 607.05	502 and 607 1508, Florida Statute	s, the above	re-named corp	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing	its registered
agent. La	egistered agent, or boin, in the state m familiar with, and accept the obli	gations of, Section 607.0505, Flor	rida Statute	ss.	norra board of directors. I horeby decept the b	рропипон	, rog.o.c.
SIGNATURE							
BIGHTATOTE	Signature Typed or printed name of registered a	gent and title if applicable (NOTE	Registered Ag	jent signature require	red when reinstating) DATE		
						UD DIDCOT	200 11 10
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	DP	ND DIRECTORS DELETE	1.1 TITLE		Secretan	ND DIRECTO	
	DP Wallner, Klaus		1.1 TITLE 1.2 NAME				
TITLE	DP Wallner, Klaus Walkueren Strasse 36	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREE	T ADDRESS	Hildegard Goertz		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WALLNER, KLAUS WALKUEREN STRASSE 36 82110 GERMERING, GERMA	□ DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-	T ADDRESS	Hildegard Goertz 743 Mirror Lakes Dr	Change	e 🙀 Addition
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I never by certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic indicated on this annual report or suppliemental 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 trustre emptiwered 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.