

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 06, 1999 8:00 am  
Secretary of State

05-06-1999 90250 002 \*\*\*150.00

DOCUMENT # P95000047615

1. Corporation Name

KLS DEVELOPMENT COMPANY, INC.

Principal Place of Business

2101 W. COMMERCIAL BLVD.  
SUITE 4100  
FT. LAUDERDALE FL 33309  
US

Mailing Address

2101 W. COMMERCIAL BLVD.  
SUITE 4100  
FT. LAUDERDALE FL 33309  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/19/1995

4. FEI Number

65-0589864

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FORMAN, ROBERT S. A  
2101 W. COMMERCIAL BLVD.  
FT. LAUDERDALE FL 33309

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 D ☐ DELETE  
NAME SHIMM, KENNETH L  
STREET ADDRESS 2101 W. COMMERCIAL BLVD., #4100  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Vice President ☐ Change ☒ Addition  
1.2 NAME Stephanie Kanter  
1.3 STREET ADDRESS 2101 W. Commercial Blvd., #4100  
1.4 CITY-ST-ZIP Fort Lauderdale, FL 33309

2.1 TITLE Vice President ☐ Change ☒ Addition  
2.2 NAME Adam Kanter  
2.3 STREET ADDRESS 2101 W. Commercial Blvd., #4100  
2.4 CITY-ST-ZIP Fort Lauderdale, FL 33309

3.1 TITLE Vice President ☐ Change ☒ Addition  
3.2 NAME Stacey Shimm  
3.3 STREET ADDRESS 2101 W. Commercial Blvd., #4100  
3.4 CITY-ST-ZIP Fort Lauderdale, FL 33309

4.1 TITLE D/P/S/T ☒ Change ☐ Addition  
4.2 NAME Kenneth L. Shimm  
4.3 STREET ADDRESS 2101 W. Commercial Blvd., #4100  
4.4 CITY-ST-ZIP Fort Lauderdale, FL 33309

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/99

954-430-1802

CR2E034 (11/98)