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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000067004 (8)

1. Corporation Name

KELLY'S BILLIARDS OF THE PALM BEACHES, INC.



Principal Place of Business

1982 WOODLAKE TERRACE
DEERFIELD BEACH FL 33442

Mailing Address

1982 WOODLAKE TERRACE
DEERFIELD BEACH FL 33442

2. Principal Place of Business

21 5877 S. CONGRESS AVE

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

ATLANTIC FL

28 City & State

29 City & State

24 Zip

33462

25 Country

USA

29 Zip

29 Zip

30 Country

30 Country

9. Name and Address of Current Registered Agent

KUSNICK, HOWARD A
8211 W. BROWARD BLVD.
SUITE 420
FT. LAUDERDALE FL 33324

10. Name and Address of New Registered Agent

81 Name CHRISTOPHER TAUBER
82 Street Address (P.O. Box Number is Not Acceptable)
1982 WOODLAKE TERRACE
83
84 City DEERFIELD BEACH FL 85 Zip Code 33442

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]

PRESIDENT

5-12-96

Signature, typed or printed name of officer or director of the corporation

(If the Registered Agent is not an officer or director of the corporation)

Date

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME TAUBER, CHRISTOPHER
STREET ADDRESS 1982 WOODLAKE TERRACE
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE D ☐ DELETE

NAME HAGERTY, KELLY
STREET ADDRESS 1982 WOODLAKE TERRACE
CITY-ST-ZIP DEERFIELD BEACH FL 33442

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 ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-12-96 (407) 966-2990

CR2E034 (12/95)