

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
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90113 047 ***168.75

DOCUMENT # P95000073850

1. Corporation Name
KALIE'S KORNER, INC.

Principal Place of Business
16781 HARBOR COURT
FT LAUDERDALE FL 33326

Mailing Address
16781 HARBOR COURT
FT LAUDERDALE FL 33326

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/25/1995

4. FEI Number
65-0611850

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing ☒ \$5.00 May Be
Trust Fund Contribution Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business
21 16339 MALIBU DRIVE

2a. Mailing Address
26 16339 MALIBU DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 City & State
WESTON, FL

27 City & State
WESTON, FL

24 Zip 33326 25 Country USA

29 Zip 33326 30 Country USA

9. Name and Address of Current Registered Agent

STALKER, TRUDI A
16781 HARBOR COURT
FT LAUDERDALE FL 33326

10. Name and Address of New Registered Agent

81 Name TRUDI ANNE STALKER
82 Street Address (P.O. Box Number is Not Acceptable)
16339 MALIBU DRIVE
83
84 City WESTON FL 85 Zip Code 33326

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 Trudi Anne Stalker President 1/2/99
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 STALKER, TRUDI A
STREET ADDRESS 16781 HARBOR COURT
CITY-ST-ZIP FT LAUDERDALE FL 33326

TITLE D ☒ DELETE
NAME KLEIN, KALIE ANNE
STREET ADDRESS 16781 HARBOR COURT
CITY-ST-ZIP FORT 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition
1.2 NAME TRUDI ANNE STALKER
1.3 STREET ADDRESS 16339 MALIBU DRIVE
1.4 CITY-ST-ZIP WESTON, FL 33326

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 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: Trudi Anne Stalker President 1/2/99 954-389-1100
Signature and typed or printed name of signing officer or director Date Daytime Phone #

0307205

CR2E034 (11/98)