FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996	The state of the s	DIVISION OF C	
DOCUMENT # 1. Corporation Name	P95000083014		
KIA ENT	ERPRISES		

DOCUME 1. Corporation Name	ENT # P95000	0083014			
KLA	ENTERPRISE	īS			
Principal Place of B P.O.BOX EATON		Mailing Address P.O.BOX 2 EATON PA	ARK FLH	3. Date incorporated or Qualific	d 38. Date of Last Report
3384	0	3384	10	10/30/95	NA
2. Principal Place o	of Business	2a. Mailing Address 26		59 32509	Applied For Not Applicable
Suite, Apt. #, et	С.	Suite. Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country 25	Ζιρ 29	Country 30		for intangible tax under s. 199.032; Yes 🔼 No
9	. Name and Address of Current	Registered Agent		10. Name and Address of Ne	w Registered Agent
Kimbe -708- Lakeli	sky legg Co Jefferson Av and, Fl. 3380	e 1201 Hays Tallahasse	51. 82 Street A 708	Limberly Legg address IPO. Box Momber is Not Accept Jefferson	otable) AVE
		252	i5 " Ya	Keland	FL 85 33801
I or registered a	agent, or both, in the State of Horida	i. Sucri change was authorized	s, the above named co d by the corporation's l	rporation submits this statement for the board of directors. I hereby accept the	purpose of changing its registered office appointment as registered agent. I am
familiar with, a	nd accept the obligations of Section	n 607,0505, Florida Startiles. Rimbei	rly Legg	genes sherrise shariq	April 18, 1996
12.	OF HCERS AND		13.		OFFICERS AND DIRECTORS IN 12
TITLE		☐ DELETE	1 1 TITLE	PD	Change Addition
NAME			1.2 NAME	LEGG KIMBERLY 708 JEFFERSON	AVF.
STREET ADDRESS			1.3 STREET ADORESS	LAKELAND FL	33801
CITY - ST - ZIP		DELETE	1.4 CHY-ST-ZIP 2.1 TILE	LHKELHNO FL	Change Addition
TITLE NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP			2.4 CHY+S1-ZIP		
TITLE		☐ DELETE	3 1 THLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELFTE	3.4 C-TY - ST - ZIP		Change Addition
TITLE			4 1 HILE	400001:	กเการเคล
NAME			4.2 NAME 4.3 STREET ADDRESS	400001: -04/30/960	01017017
STREET ADDRESS			4.4 Gity - \$1 - ZiF	***200.00	
CITY - ST - 2IF		☐ DÉLET L	5 1 THLE		Change Addition
NAME			5.2 NAME		
STREE! ADDRESS			5.3 STREET ADDRESS		
CiTY+S1-ZiP			5.4 CITY - ST - ZIP		
TITLE		DELETE	5 1 TiTuf		☐ Change ☐ Addition
NAME			6.2 NAME		DEB
STREEL ADDRESS			6.3 STREET ADDRESS		4-29-96
CITY - \$1 - 71P			6.4 CITY - ST - ZIP		7-01-10

14. If 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 he 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 early, 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: SIMBLE AND TYPE OR PRINTED JAME OF SIGNING OFFICER OR DIRECTOR

April 18, 1996