

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Suzanne Morse
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000091533 (6)**

1. Corporation Name
K & L ENTERPRISES, INC.



Principal Place of Business: **9625 RIVERSIDE DRIVE, #D5 CORAL SPRINGS FL 33072**
Mailing Address: **9625 RIVERSIDE DRIVE, #D5 CORAL SPRINGS FL 33072**

2. Principal Place of Business:
21. State, Apt. #, etc: **SAME AS ABOVE**
22. City & State: "
23. Zip: " County: "
24. " 25. " 26. Mailing Address:
26. State, Apt. #, etc: **SAME AS ABOVE**
27. City & State: "
28. Zip: " County: "
29. " 30. " 9. Name and Address of Current Registered Agent

**KAMENAR, WALTER
9625 RIVERSIDE DRIVE, #D5
CORAL SPRINGS FL 33072**

3. Date(s) incorporated or qualified: **12/01/1995**
3a. Date of Last Report:
4. FEI Number: **65-0619515** 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**
7. This corporation is a liability for filing fee under s. 190.032, Florida Statutes: Yes No
10. Name and Address of New Registered Agent

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 190.01 and 190.02, Florida Statutes, the undersigned corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Said corporation hereby certifies that the corporation's Board of Directors has duly accepted the appointment as registered agent. I am familiar with and accept the obligations of Sections 190.01 and 190.02, Florida Statutes.

SIGNATURE: _____ OF OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:
TITLE: **D** Delete
NAME: **KAMENAR, WALTER**
STREET ADDRESS: **9625 RIVERSIDE DRIVE, #D5**
CITY, ST, ZIP: **CORAL SPRINGS FL 33072**
TITLE: DELETE
NAME: DELETE
STREET ADDRESS: DELETE
CITY, ST, ZIP: DELETE
TITLE: DELETE
NAME: DELETE
STREET ADDRESS: DELETE
CITY, ST, ZIP: DELETE
TITLE: DELETE
NAME: DELETE
STREET ADDRESS: DELETE
CITY, ST, ZIP: DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:
 Change Addition
 Change Addition
 Change Addition
 Change Addition
 Change Addition
 Change Addition

14. I do hereby certify that the information supplied with this document is truly and correctly furnished to me by the corporation's Board of Directors. I further certify that the information in Block 12 of this document is truly and correctly furnished to me by the corporation's Board of Directors. I further certify that I am an officer or director of the corporation and that my name appears in Block 12 or Block 13 of this document. I am a resident of the State of Florida and that my name appears in Block 12 or Block 13 of this document. I am a resident of the State of Florida and that my name appears in Block 12 or Block 13 of this document.

SIGNATURE: *Walter Kamenar*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/96 954-344-8474

CR2E034 (12/95)