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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000091533 (6)

K & L ENTERPRISES, INC.

Principal Place of Business

Mailing Address

9625 RIVERSIDE DRIVE. #D5 CORAL SPRINGS FL 33072

9625 RIVERSIDE DRIVE, #D5 CORAL SPRINGS FL 33072

FILED Apr 14 1998 8:00am Secretary of State



95-5/-

					DO NOT WRITE IN THIS SE	ACE.		
					3. Date Incorporated or Qualified			
					12/01/1995			
	ace of Business	2a. Mailing Address	7 ,	. /	4. FEI Number		pplied For	
	25 Riverside DA	26 9625 KI	UER	ide.	65-0619515		lot Applicable	
Suite, Apt.		Surie, Api. #, etc.	_		5. Certificate of Status Desired	•	Additional	
							lequired	
City & State				6. Election Campaign Financing	•	May Be		
23 COR	96 3 KINJS, 12	28 60000 20	COL	1/2	Trust Fund Contribution		I to Fees	
ص محر کے ا	71 25 DROWARD	29 3707/ 3	والمالكان الم	on NR 2	8. This corporation owes or has paid the curre Personal Property Tax due June 30.		No No	
٠٠ در ٢٩	9. Name and Address of Current Ro			110 7/1/02	10. Name and Address of New Registered As			
KAMENAR, WALTER 81 Name								
9625 RIVERSIDE DRIVE, #D5								
CORAL SPRINGS FL 33072			82	82 Street Address (P.O. Box Number is Not Acceptable)				
			83	83				
			L.					
			84	City	FL	85 Zip	Code	
11. Pursuant I	to the provisions of Sections 607 0502 ar	id 607 1508. Horida Statutes	the abov	e-named co	orporation submits this statement for the purpose of c	LL 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. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
	m tarimar wirr, and accept the congain	15 DI, BECHOIT OUT JOSON, FIORI	ua Siaiule	δ.				
SIGNATURE	Signature, typed or preced name of a gettered agent as	diute if applicable (NOT)	Registered Ag	ent signature re	guired when reinstating) DATE			
12.	OFFICERS AND D	IRI CTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTO	RS IN 12	
TITLE	D	DELETE	1.1 TITLE			Change	Addition	
NAME	KAMENAR, WALTER		1.2 NAME					
STREET ADDRESS	9625 RIVERSIDE DRIVE, #D5		1.3 STREE	AODRESS				
CITY-ST-ZIP	CORAL SPRINGS FL 33072		1.4 CHY-	ST - ZIP				
TITLE		DELETE	2.1 DTLF			Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS			2 3 S1HEE	ADDRESS				
CITY-ST-ZIP			2 4 CITY-	ST-ZIP				
TITLE		☐ DELETE	31 THLE			Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 \$1 HEE	ADDRESS				
CITY-ST-ZIP			3.4. CITY-	S1 · ZIP				
TITLE		☐ DELETE	4.1 TITLE			Change	Addition	
NAME			4. 2 NAME				1	
STREET ADDRESS			4.3 \$1REE	ADDRESS			1	
CITY-ST-ZIP		and the second second	4.4 CHY-	ST · ZIP				
TITLE		L DELETE	5.1 TITLE		L	Change	Addition	
NAME		i	5.2 NAME				i	
STREET ADDRESS			5.3 STREE	ADDRESS			ļ	
CITY-ST-7iP			5.4 CITY-5	5T - 7IP				
TITLE		L_ DELETE	6.1 TITLE		L	Change	☐ Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	ADDRESS				
CITY-ST-ZIP			6.4 CITY - 5	ST - ZIP				
14. I hereby c	ertify that the information supplied with to on this annual report or supplemental an	his filing does not qualify for I noual report is true and accur	the exemp ate and th	ition stated at my signa	in Section 119.07(3)(i), Florida Statutes. I further cert sture shall have the same legal effect as if made undu- equired by Chapter 607, Florida Statutes; and that my	ity that the er oath: th	e information lat Lani an	
officer or o	director of the corporation or the received	or trustee empowered to ex	coole His	report as re	equired by Chapter 607, Florida Statutes; and that my	, name ar	opears in	
BIOCK 12 C	or block its ir changed, or on all allamin	umi with an address.			1, 9	برريوسي	1	