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

DOCUMENT # **P96000015655**1. Corporation Name

KENMAR HOLDING CORP.

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90129 025 ***150.00



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Principal Place	e of Business	М	lailing Address						164 11601 B1110 B	/(4 B F B I	
1004 10TH AVENUE. SOUTH JACKSONVILLE BEACH FL 32250 1004 10TH AVENUE. SOUTH JACKSONVILLE BEACH FL 32250					250			DO NOT WRITE IN T	HIS SPACE		
								3. Date Incorporated or Qualifed 02/20/1996			
2. Principal Place of Business 2a. Mailing Add				dress				4. FEI Number		Арр	lied For
21		26						59-3362300		Not	Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				2 -	5. Certificate of Status Desired			
City & State			City & State					6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country		Zip	Col	ıntry	•		8. This corporation owes the current year	_		
24	25	29		30				Personal Property Tax.	∐ Yes		No
	9. Name and Address of Current	Regis	stered Agent		ļ.,	1		10. Name and Address of New Register	ed Agent		
D110	014441 41050T 5 10				81	Nan	10				
Buschman, Albert e Jr. 2215 South Third Street					82 Street Addre			iss (P.O. Box Number is Not Acceptable)			_
, SUITE 101					83						
JACI	KSONVILLE BEACH FL 32250				84	City			85 Z	Zip Co	ode
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida 						the co	ed corpo rporation	ration submits this statement for the numose	of changing	its regi	egistered istered
SIGNATURE											
	Signature, typed or printed name of registered agent					nt signati	ire required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS			20 IÁL 12
12.	OFFICERS AND	DIKI	DELETI	13. E 1.1 T				ADDITIONS/CHANGES TO OFFICERS	Chan		Addition
TITLE	DPTS				AME				_	•	_
NAME	ALBERT, KENNETH J					TADDDE					
STREET ADDRESS						T ADDRE	33				1
CITY-ST-ZIP	JACKSONVILLE BEACH FL		☐ DELET		iTY-S	I-ZIP			Chan	106	Addition
TITLE	VD									9-	
NAME	ALBERT, MARIE F				AME	T + 0000					ì
STREET ADDRESS	•			1		TADDRE	55				
CITY-ST-ZIP	JACKSONVILLE BEACH FL		DELET			ST-ZIP	 		Chan	ме	Addition
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CITY-ST-ZIP TITLE			□ DELET			ST-ZIP	+		☐ Chan	nge	Addition
NAME					AME				_	_	_
STREET ADDRESS						TADORE	56				
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CITY-ST-ZIP			☐ DELET	E 5.17		1-211			☐ Chan	nge	Addition
NAME	\		<u> </u>	· •	AME				_		į
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TITLE			DELET				+		☐ Chan	nge	Addition
NAME					AME						
STREET ADDRESS						TADORE	ss				1
STREET ADDRESS	Į.			1			1				

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.