

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2002 8:00 am**  
**Secretary of State**  
 04-18-2002 90491 032 \*\*\*150.00

**DOCUMENT # P96000022572**

1. Entity Name  
**KOWIE ENTERPRISES, INC.**

Principal Place of Business  
**12950 DANIEL DR NTH**  
**CLEARWATER FL 33762**  
**US**

Mailing Address  
**2683 WALNUT DRIVE**  
**PALM HARBOR FL 34683**  
**US**

2. Principal Place of Business  
**3639 CORTEZ RD WEST**  
 Suite, Apt. #, etc.  
**SUITE 250**

3. Mailing Address  
**P.O. Box 1453**  
 Suite, Apt. #, etc.

City & State  
**BRADENTON FLORIDA**

City & State  
**BRADENTON FLORIDA**

4. FEI Number **58-2227132**

Applied For  
 Not Applicable

Zip  
**34210**

Country  
**USA**

Zip  
**34206**

Country  
**USA**

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

## 6. Name and Address of Current Registered Agent

**SNOEK, LINDA J**  
**2683 WALNUT DRIVE**  
**PALM HARBOR FL 34683**

## 7. Name and Address of New Registered Agent

Name **AAA BOOKKEEPING SERVICES**

Street Address (P.O. Box Number is Not Acceptable)

**3639 CORTEZ RD WEST**

City **BRADENTON**

**FL**

Zip Code  
**34210**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE   
 Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**04/08/02**  
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
 NAME **P SNOEK, ALLAN G**  
 STREET ADDRESS **2683 WALNUT DRIVE**  
 CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE ☐ Delete  
 NAME **S SNOEK, LINDA J**  
 STREET ADDRESS **2683 WALNUT DRIVE**  
 CITY-ST-ZIP **PALM HARBOR FL 34683**

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

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
 NAME **P SNOEK ALLAN G**  
 STREET ADDRESS **3639 CORTEZ RD WEST**  
 CITY-ST-ZIP **BRADENTON FL 34210**

TITLE ☒ Change ☐ Addition  
 NAME **S SNOEK LINDA J**  
 STREET ADDRESS **3639 CORTEZ RD WEST**  
 CITY-ST-ZIP **BRADENTON FL 34210**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **ALLAN G. SNOEK**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**04/08/02**

Date

**941 7470305**

Daytime Phone #

CR2E034 (9/01)