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 # P96000026680 (4)

K & D VACATIONS, INC.

FILED Jan 16 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 2504 SW 38TH TERRACE 2504 SW 38TH TERRACE CAPE CORAL FL 33914 CAPE CORAL FL 33914 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/21/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0659559 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes X No 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SEEMANN, ERNEST A ESQ 4729 DEL PRADO BLVD 82 Street Address (P.O. Box Number is Not Acceptable) CAPE CORAL FL 33904 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTL: Registered Agont signature required when reinstating) (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Change Addition TITLE 1.1 THE SCHOETTLER, KARL-HEINZ 1.2 NAME NAME **CR2E034** UHLANDSTRASS 3, D-71093 STREET ADDRESS 1.3 STREET ADDRESS BREITENSTEIN, GERMANY 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE SCHOETTLER, DORIS NAME 2.2 NAME UHLANDSTRASS 3, D-71093 2.3 STREET ADDRESS STREET ADDRESS BREITENSTEIN, GERMANY 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY - S1 - ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP CITY-ST-ZIP DELETE Change Addition THILE 5 1 111LE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-S1-ZIP 5 4 CITY - \$1 - ZIP DELETE ☐ Change Addition TITLE 6.1 THE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP ling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information nformation sur lied with th

14. Thereby certify that the information sup blied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic indicated on this annual report or supplemental and if stree and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the recovered sustee 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 Islandiner with an address.