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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000029656 (1)

EKM ENTERPRISES, INC.

Principal Place of Business

THE

NAMS

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-S1-74

STREET ADDRESS

CHTY - ST - ZIP

1104 76TH ST NW 1104 76TH ST NW BRADENTON FL 34209-1031 **BRADENTON FL 34209** 3. Date Incorporated or Qualified 3a. Date of Last Report 03/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0668107 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 **Trust Fund Contribution** Added to Fees 28 Zφ Country Ζφ Country This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No. No. Name and Address of New Registered Agent 30 25 29 24 9. Name and Address of Current Registered Agent 81 Name GRUWELL, MARK 747 N WASHINGTON BLVD Street Address (P.O. Box Number is Not Acceptable) 82 SARASOTA FL 34236 83 84 City Zip Code 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 (NOTE Registered Agent signature required when reinstating) Signature, typed or pented name of registered agent and tice if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. 13. DELETE 1.1 TITLE Change **Addition** THILE EDWAND K GENERY JE CR2E034 NAME 1.2 NAME 1104 TU ST NU STREET ADDRESS 1.3 STREET ADDRESS 31207 <u>Βνφοεητοή</u> CITY - ST - ZIF 14 CITY-ST-ZIP Addition DELETE Change TITLE 21 THUE MARY K. GRUHELL NAME 2.2 NAME 1104 76 ST HA 2.3 STREET ADDRESS STREET ADDRESS 34209 2. 4 City-ST-ZIP CHT-ST-ZIP

64 CITY-ST-ZIP

14. If do 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 of 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.

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADORESS

5.4 CITY-ST-ZIP

4.4 City-St-ZiP

34. CITY-ST-ZIP

SIGNATURE SIGNATURE AND TYPE O OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESSENT

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May 09 1997 8:00am

Secretary of State