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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 18 1998 8:00am

Secretary of State

Change

Addition

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000040724 (2)

K.L.B.R. CORPORATION

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STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

Principal Place of Business Mailing Address 1318 LAFAYETTE STREET 1318 LAFAYETTE STREET CAPE CORAL FL 33904 CAPE CORAL FL 33904 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/06/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0666412 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Ζip Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. Yes 29 25 . Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HILL THOMAS W 1318 LAFAYETTE STREET Street Address (P.O. Box Number is Not Acceptable) CAPE CORAL FL 33904 83 84 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 Signature, typed or printed name of registered agent and title d applicable (NOTE: Registered Agent signature required when reinstating) OF HICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE Ď 1.1 TITLE HEGEMANN, BRIGITTE NAME 1.2 NAME **1318 LAFAYETTE STREET** STREET ADDRESS 1.3 STREET ADDRESS CAPE CORAL FL 33904 CITY-ST-ZIP 1.4 CITY - \$T - ZIP DELETE Addition Change TITLE 2.1 TITLE NAME HILL, THOMAS W 2.2 NAME **1318 LAFAYETTE STREET** 2.3 STREET ADDRESS STREET ADDRESS **CAPE CORAL FL 33904** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME

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 13 if changed, or on an attachment with an address.

5.3 STREET ADORESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE