04-27-1999 90089 028 ***150.00

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 #	P96000043271
1. Corporation Name	. 000000 .02.

KELL CORPORATION OF BRANDON, INC

Principal Place of Business Mailing Address 1806 OAKHURST ST 1806 OAKHURST ST BRANDON FL 33511 BRANDON FL 33511

|--|

DO NOT WRITE IN THIS SPACE

Date Incompreted or Qualifed

					05/21/1996	
2 Principal Pl	ace of Business	2a, Mailing Address			4. FEI Number	Applied For
21		26			65-0663276	Not Applicable
Suite, Art.	#. etc.	Suite, Apt. #, etc.				\$8.75 Ac ditional
22	•	27			5. Certificate of Status Desired	Fee Required
City & State	•	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes the current year Inta	
24	25	29	30		Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Currer	nt Registered Agent	T		10. Name and Address of New Registered A	gent
				11 Name		
REE	DY, MICHAEL		-	32 Street Ac	dress (P.O. Box Number is Not Acceptable)	
2130	W BRANDON BLVD #202		,	Sileer Ac	diess (F.O. Box Number is Not Acceptable)	
BRAI	NDON FL 33511		1	33		
						T-1 31 5 1
			18	City	FI	85 Zip Code
		00 CO7 1500 Florida Sta	it too the obj	we named or	rporation submis this statement for the purpose of o	hanging its registered
l office care	egistered agent, or both, in the State m familiar with, and accept the obligations.	rif Florida, Such change wa	s authorized i	ov the corbora	ation's board of directors. I hereby accept the appoin	ment as registered
SIGNATUE	Signature, typed or printed name of registered age				ilred when reinstating) DATE	
		ND DIRECTORS	13.	g-m sagment	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
12.	D	☐ DELETE	1.1 TITL	E T	7,00,0,0	☐ Change ☐ Addition
	KELL, DAVID	_	1.2 NAM			
NAME	1806 OAKHURST ST				•	
STREET ADDRESS				EET ADDRESS	•	
CITY-ST-ZIP	BRANDON FL 33511	☐ DELETE	2.1 TITL	-ST-ZIP		Change Addition
TITLE		[] DECE IE		ļ		C a manage C management
NAME			2.2 NAM			
STREET ADDRESS			23 STR	EET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		Change Addition
TITLE		☐ DELETE	3.1 TITL	E		Change Addition
NAME			3 2 NAN	E		
STREET ADOR ESS			3.3 STR	EET ADDRESS		
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP		
TITLE		☐ DELETE	4.1 TITL	E		☐ Change ☐ Addition
NAME			4. 2 NA	AE		
STREET ADDRESS			4.3 STR	EET ADDRESS		
CITY-ST-ZIP			44 CIT	-ST-ZIP		
TITLE		DELETE				☐ Change ☐ Addition
NAME			5.2 NAM	IE		
			5.3 STR	EET ADDRESS		
STREET ADDRESS				'-ST-ZIP		
CITY-ST-ZIP		☐ DELETE				☐ Change ☐ Addition
TITLE			6.1 NAM			
NAME						
STREET ADDF ESS			1	EET ADDRESS		
CITY-ST-ZIP	}		6.4 CIT	/-ST-ZIP		

CITY-ST-ZIP 14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.(7(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signic ture shall have the same legal effect as if made under oath; that I am an office 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.