


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2005 08:00 AM
Secretary of State

| | |
|--|---|
| DOCUMENT # P96000059142 1. Entity Name KIS PRODUCTS, INC. |  |
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|---|---|
| Principal Place of Business 2318 SEA ISLAND DRIVE FORT LAUDERDALE, FL 33301 | Mailing Address 2318 SEA ISLAND DRIVE FORT LAUDERDALE, FL 33301 |
|---|---|



04292005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-0723727 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

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

6. Name and Address of Current Registered Agent

POWELL, JACQUELINE
2318 SEA ISLAND DRIVE
FORT LAUDERDALE, FL 33301

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|--------------------------|
| TITLE | D |
| NAME | HERTZ, REUBEN |
| STREET ADDRESS | 2318 SEA ISLAND DR. |
| CITY-ST-ZIP | FT. LAUDERDALE, FL 33301 |

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Reuben Hertz, Director 4/29/05 954-764-0270

Date

Daytime Phone #