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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000061500 (0)

KNB WHOLESALE, INC.

Principal Place of Business 6469 SHOAL CREEK CIR BRANDON FL 34202

Mailing Address

6469 SHOAL CREEK CIR BRANDON FL 34202-1713

FILED May 09 1997 8:00am Secretary of State



								f	3. Date Incorporated or Qualified 07/22/1996	3a. Da	te of Last R	eport		
2. Principal P	Jane of Rusini	nee	2a Mail	2a. Mailing Address					4. FEI Number			oplied For		
21	Idage or Edg.	26	 				ı	65-0705119			ot Applicable			
Suite, Apt	#. etc		Suite, Apt. #, etc.							\$8.75				
22		27	27					5. Certificate of Status Desired		Fee Re				
City & Stati	.е			City & State					6. Election Campaign Financing	_	\$ 5.00			
23			28	- 					Trust Fund Contribution	<u> </u>	Added			
Zφ						5. This corporation has hability for interrigible tax arroor 8. 100.002;					. 199.032,			
24 25 29 30														
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WINKLED KATHLEEN P. 81 Name														
WINKLER, KATHLEEN P														
6469 SHOAL CREEK CIR Brandon Fl 34202							82 Street Address (P.O. Box Number is Not Acceptable)							
							83							
							City	••	· · · · · · · · · · · · · · · · · · ·	FL	85 Zip (Code		
11. Pursuant	to the provision	ons of Sections 60	7.0502 and 607.15	08, Florida Statut	es, the al	oove	named c	corpora	ation submits this statement for the	ourpose of	changing it	s registered		
office or r apent La	registered age an familiar wit	ent, or both, in the hiland accept the	State of Florida, Su obligations of Sec	uch change was a stinn 607 0505 Ft	authorizea orida Stat	d by utes	the corpo	oration	i's board of directors. I hereby acce	pt the appo	ointment as	registered		
		in and decept into	oungerior on cou		ondo oldi							ĺ		
SIGNATURE	Signature, typed o	or printed name of registe	red agent and title if appli	cable (NOT	E: Registered	Ape	ni signature re	equired y	when reinstating)	DATE				
12.		OFFICEP	S AND DIRECTOR	S	13.				ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTOR	IS IN 12		
11111	D					1.1 TITLE					Change	Addition		
NAME	WINKLER, KATHLEEN P				1.2 N/	AME								
STREET ADDRESS	AAAA AHAAH ADEEK CID					1.3 STREET ADDRESS								
CITY - ST - ZIP	BRANDON	I FL 34202					T-ZIP					İ		
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NAME	}			Part Office In	6.2 N/		}				ononge			
STREET ADDRESS							ADDRESS					l		
}	1						1					ı		
14 I do bere	by cortify that	the information e	innlied with this file	no does not qual			T-ZIP	ated in	Section 119.07(3)(i), Florida Statuto	as Hurthar	Certify that	the		
informatic	in indicated o	in this annual repo	rt or supplemental	annual report is t	true and a	accu	rate and t	that m	y signature shall have the same leg-	al effect as	if made un	der oath; that I		