

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29 1997 8:00am
Secretary of State

DOCUMENT # P96000062095 (0)

1. Corporation Name
KIES ENTERPRISES, INC.

Principal Place of Business

334 MINORCA AVE
SUITE 200
CORAL GABLES FL 33134

Mailing Address

334 MINORCA AVE
SUITE 200
CORAL GABLES FL 33134-4304



2. Principal Place of Business

21 9048 SW 152 ST.

Suite, Apt. #, etc.

City & State

22 MIAMI, FL

Zip Country

23 33157 25 USA

2a. Mailing Address

26 9048 SW 152 ST.

Suite, Apt. #, etc.

City & State

27 MIAMI, FL

Zip Country

28 33157 30 USA

3. Date Incorporated or Qualified
07/23/1996

3a. Date of Last Report

4. FEI Number

65-0691660

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

BRIDGES, ROGER A
334 MINORCA AVE
SUITE 200
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

CONRAD A. KIES

82 Street Address (P.O. Box Number is Not Acceptable)

9048 SW 152 ST

83

84 City

MIAMI

FL

85 Zip Code
33157

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 Conrad A. Kies CONRAD A. KIES

4-21-97

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☒ DELETE

BRIDGES, ROGER A
334 MINORCA AVE SUITE 200
CORAL GABLES FL 33134

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP ☒ Change ☐ Addition

P/D
CONRAD A. KIES
15205 SW 73 CT.
MIAMI, FL 33157

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP ☐ Change ☒ Addition

S/T/D
JANET S. KIES
15205 SW 73 CT.
MIAMI, FL 33157

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP ☐ Change ☐ Addition

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP ☐ Change ☐ Addition

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP ☐ Change ☐ Addition

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP ☐ Change ☐ Addition

14. I 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 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.

CR2E034 (9/96)