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

PROFIT. CORPORATION ANNUAL REPORT

STREET ADDRESS

CHY-ST-ZiP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1997 8:00am

Secretary of State

Sandra B. 🍎 thein

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P9600066971 (8)

K.C.B. ISLAND PAR 3, INC.

Principal Place of Business Mailing Address POBOX 35 460 8TH STREET :460 STH STREET KEY COLONY BEACH FL 33051 KEY COLONY BEACH FL 33051 3. Date Incorporated or Qualified 3a. Date of Last Report 08/08/1996 2. Principal Place of Business 2a. Mailing Address Applied For 65-068-7644 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WAYNE 1 460 67H 6THEET 4 4 9 50 (3 5 Street Address (P.O. Box Number is Not Accep 82 KEY COLONY BEACH FL 99051 83 2701 DOLPHIN DR. Zip Code 33050 MARATHON, FL, 33050 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 Signatore, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CHAIRMAN, PRILSIDIENT TREASURER TITLE 11 DUE ☐ Change ☐ Addition WAYNE ISPANO NAME 1.2 NAME STREET ADDRESS 2701 DOLPHIN DR. 1.3 STREET ADDRESS MARATHON, FL 33050 CITY-ST-ZIP 1.4 CITY-ST-ZIP HILE V. PRESIDENT, SIE. CRETAR DELETE 2.1 TITLE Change Addition NAME MARY IE SPANO 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2701 DOCFHIN DR. CITY - ST - ZIP MARATHON, IL 2.4 CITY-ST-ZIP DELETE THLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - \$1 - ZiP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CHTY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change 99 TITLE 6.1 TITLE Addition 90000216419 -05/02/97--01117--026 ***165.00 NAME 6.2 NAME

6.3 STREET ADDRESS

CURYNA J.SPANO

Feb. 14 97 305-289-1533

64 CITY-ST-ZIP 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 obsecute 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.