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

PROFIT CORPORATION ANNUAL REPORT

1998

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Zip

City & State



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name P96000069060 (7)

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KUHNS, SUSAN

KUHN'S HOOFING SERVICE				
Principal Place of Business	Mailing Address			
12559 57TH ROAD NORTH ROYAL PALM BEACH FL 33411	12559 57TH ROAD NORTH ROYAL PALM BEACH FL 33411	DO NOT WRIT		
		3. Date incorporated or Qualified 08/16/1996		
2. Principal Place of Business	2a. Mailing Address	4. FEI Number		
21	26	65-0693256		
Duden And Hosto	Cuito Ant # oto			

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9. Name and Address of Current Registered Agent

City & State

**FILED** Mar 25 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

Applied For

Fee Required

\$5.00 May Be

Added to Fees

🔀 Yes

Not Applicable \$8.75 Additional

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

12559 57TH ROAD NORTH ROYAL PALM BEACH FL 33411		82	Street	Address (P.O. Bo)	x Number is	Not Acceptable	lø)			1	
n.	TAL FALM BENOTIFE 30411		83		<u>, , , , , , , , , , , , , , , , , , , </u>						7
			84	City					<b>85</b> Zip	Code	$\frac{1}{2}$
								FL			
office or r	to the provisions of Sections 607.0502 and 607.150 registered agent, or both, in the State of Florida. Sum familiar with, and accept the obligations of, Section 1.	ch change was auth	norized by	the core	corporation submooration's board o	its this state f directors.	ement for the pr I hereby accep	urpose of the app	changing i ointment as	ts registered registered	]
SIGNATURE											
40	Signature, type-1 or printed name of registered agent and title if applications of FICERS AND DIRECTORS			nt signature	required when reinstatin		GES TO OFFIC	DATE	DIDECTOL	OC IN 10	ქნ
12. TITLE	D OFFICERS AND DIRECTORS	DELETE	13.		ADDITI	ONS/CHAN	GES TO UPFIC		Change	Addition	≧
NAME	KUHN, SUSAN	DECENE	1.2 NAME		,				-		-
STREET ADDRESS	1991 NORTHWEST 33RD ST		1.3 STREET	ANNIBECC	12559	57	Rd N Bch 1				]8
	POMPANO BEACH FL 33064				12559 Royal	ومامه	Bah	CI	334	//	ű
CATY-ST-ZIP TITLE	TOMERIO DEROTTE 03004	DELETE	1.4 CITY - ST - ZIF		ROYUI	railli	DCI) I		Change	Addition	46
NAME		OLLEGE.	2.2 NAME		1	**			C Citaligo	Addition	-
				******							1
STREET ADDRESS			2.3 STREET								1
CITY-ST-ZIP		DELETE	2.4 CITY - S	T-ZIP			······		Change	Addition	4
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CITY+ST-ZIP		DECEME	4.4 CITY - S	I - ZIP					T 0:	1 4 4 4 5 4 -	4
TITLE		DELETE	5.1 TITLE						Change	Addition	1
NAME			5.2 NAME								
STREET ADDRESS			5.3 STREET	ADDRESS							1
CITY-ST-ZIP			5.4 CITY-SI	- ZIP		· · · · · · · · · · · · · · · · · · ·				···	4
TITLE		DELETE	6.1 TITLE						Change	Addition	ı
NAME :			6.2 NAME	- {	ı						}
STREET ADDRESS		ř	6.3 STREET	ADDRESS							
CITY-ST-ZIP			6.4 CITY-ST		<del></del>				<del>-5:</del>		1
indicated officer or	certify that the information supplied with this filing do on this annual report or supplemental annual repor director of the corporation or the receiver or trustee or Block 13 if changed or on an attachment with ar	t is true and accurate empowered to exe	te and tha	it mv sio	nature shall have t	tne same le	gal effect as if i	made und	der oath: tha	at I am an	

Country

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