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

May 12 1997 8:00am

Secretary of State

Change

Addition

DOCUMENT # P96000070217 (0)

KDE CORP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Principal Piece of Business 1535 CENTRAL AVE MERRITT ISLAND FL 32952-5676		Mailing Address 1535 CENTRAL AVE MERRITT ISLAND FL 32952-5676						
					3. Date Incorporated or Qualified 08/21/1996	3a. Date of La	ast Report	
2. Principal P	Place of Business	2a. Mailing Address	·		4. FE! Number		Applied For	
21		26	26			P	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1 7	75 Additional	
22		27	· · · · · · · · · · · · · · · · · · ·			Fe	e Required	
City & Stat	le .	City & State		6. Election Campaign Financing \$5.00 May Be				
Zip	Country	28	Če metro		Trust Fund Contribution	*	ded to Fees	
24	}¬ *	7ip	Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
25 29 30 30					10. Name and Address of New Registered Agent			
FOI	RICO, DAVID A		81	Name		giotoi ou rigoiii		
153	5 CENTRAL AVE		82					
MERRITT ISLAND FL 32952-5676				Street Add	treet Address (P.O. Box Number is Not Acceptable)			
				83				
		· ·						
			84	City		FL 85	Zip Code	
agent. I a	am familiar with, and accept the obling signature, typed or printed name of registered a	gations of, Section 607.0505, Flo	rida Statutes	i.	poration submits this statement for the p tion's board of directors. I hereby accep red when renstating)	DATE		
12.	N	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		··	
TITLE	D DAVED A	DELETE	1.1 TO LE			∟ Cha	nge 🔲 Addition 🔓	
NAME	ERRICO, DAVID A		1.2 NAME				[5]	
STREET ADDRESS	1535 CENTRAL AVE	E070	1.3 STREET				ٳٞٳ	
CITY-ST-ZIP	MERRITT ISLAND FL 32952-		1.4 CITY - S	1 - ZIP				
TITLE NAME	ERRICO, KATHERINE L	DELETE	2.1 1111.6			L Cha	nge L] Addition	
STREET ADDRESS	1535 CENTRAL AVE		2.2 NAME	4 D D D E O O				
CITY-ST-ZIP	MERRITT ISLAND FL 32952-	5676	2.3 STREET 2.4 City - 5				1	
TITLE	TABLETTE STORY	DELETE	3.1 TOLE	1-21		Cha	nge Addition	
NAME			3.2 NAME			٥١١٥ کي	ngo	
STREET ADDRESS			3.3 STREET	ADDRESS		-		
CITY-ST-ZIP			3.4 CITY- S					
TITLE		DELETE	4.1 TITLE			☐ Cha	nge Addition	
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS			1	
CITY-ST-ZIP			4.4 CITY - S	j			1	
TITLE		☐ DELF1E	5.1 TDL€			Cha	nge Addition	
411415	F			ł				

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 eath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charging, you an attachment with an address.

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

11/1/2/1/Mile