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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000081698 (8)

KEE WEE ASSOCIATES, INC.

10893 WILES ROA CORAL SPRINGS		10693 WILES ROAD CORAL SPRINGS FL 33076	-2014				
					3. Date Incorporated or Qualified 09/30/1996	3a. Date of Last Report	
2. Principal Place of Business   2a. Mailing Address						/ Applied For	
नी		26	26		1.65-0699764	Not Applicab	
Suite, Apt. #,	elc.	Suite, Apt. #, etc.	<u></u>		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 4	Country 25		Countr 30	у	7	Yes No	
9. Name and Address of Current Registered Agent				1 Name	10. Name and Address of New Registered Agent		
GAGLIANO, ROBERT L 10693 WILES ROAD CORAL SPRINGS FL 33076			82	82 Street Address (P.O. Box Number is Not Acceptable) 83			
office or regi	the provisions of Sections 607.05 istered agont, or both, in the Statelamiliar with, and accept the obtions.	e of Florida. Such change was a	uthorized b	ve-named cor	poration submits this statement for the pation's board of directors, I heroby accept	FL 85 Zip Code  purpose of changing its registered the appointment as registered	
SIGNATURE	nature, typed or printed name of registered as	,			ired whon reinstating)	DATE	
12.		D DIRECTORS	13.	gont signates a rede	ADDITIONS/CHANGES TO OFFIC		
~	PSD	DELETE	1.1 TITLE			Change Additio	
( '	GAGLIANO, ROBERT L		1.2 NAME	}		· · · · ·	
	10693 WILES ROAD		13 STREE	T ADDRESS			
	CORAL SPRINGS FL 33076		1.4°C(TY-				
	ALD	DELETE	21 TITLE			☐ Change ☐ Additio	
	MERTINS, RICHARD F		2.2 NAME				
	10693 WILES ROAD		2.3 STREE	T ADDRESS			
	CORAL SPRINGS FL 33076		2. 4 CITY	- S1 - ZIP			
TITLE	RACKAR ALTINAMAT IN AAALA	DELETE	3.1 TITLE			Change Additio	
NAME			3.2 NAME		•		
STREET ADDRESS			3.3 STHEE	T ADDRESS			

# 64 (RIY-S1-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 eath; that I am an officer or director of the corporation or the receivor 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 or grant attachment with an address.

3.4. CITY - ST - 2(F

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 DHY-ST-ZIP

4.4 OITY-S1-2IP

4.1 TITLE

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

CICALATURE THE THE SERVICE

41-21.47

C12-3440

Change

Change

Change

Addition

■ Addition

\_\_\_ Addition

**FILED** 

Apr 28 1997 8:00am

Secretary of State