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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P96000083399 (1)**

1. Corporation Name
K AND U AUTO SALES INC.

Principal Place of Business
381 SANTA ROSA BLVD., UNIT W304
FT. WALTON BEACH FL 32548

Mailing Address
381 SANTA ROSA BLVD., UNIT W304
FT. WALTON BEACH FL 32548-6163

3. Date Incorporated or Qualified: 10/07/1996
3a. Date of Last Report: None

2. Principal Place of Business
21 4436 Windward Lake Cove
Niceville, Fla 32548
Suite, Apt. #, etc.
22
City & State
23 Niceville Fla
Zip 24 32548 Country 25 OKaloosa

2a. Mailing Address
26 4436 Windward Lake Cove
Niceville, Fla 32548
Suite, Apt. #, etc.
27
City & State
28 Niceville Fla
Zip 29 32548 Country 30 OKaloosa

4. FEI Number: 59-3408772 — 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
KROST, KENNETH J
381 SANTA ROSA BLVD., UNIT W304
FT. WALTON BEACH FL 32548

10. Name and Address of New Registered Agent
81 Name —
82 Street Address (P.O. Box Number is Not Acceptable) —
83 —
84 City — FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 or 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 and agree to act in this capacity and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] (NOTE: Registered Agent signature required when reinstating) DATE 01/15/96

12. OFFICERS AND DIRECTORS

☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Vice President	☐ Change ☐ Addition
1.2 NAME	Ursula I. Krost	
1.3 STREET ADDRESS	4436 Windward Lake Cove	
1.4 CITY-ST-ZIP	Niceville, Fla 32548	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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.

SIGNATURE: [signature] Kenneth John Krost 01/15/96 904-897-2429
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/96)

0489456