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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000096189

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

EDWARD M. KAYE ENTERPRISES, INC.

Principal Plac	ce of Business	Mailing Address			T COMMENDE COM DESIGN BRIDG BRIDG BRIDG BRIDG BRIDG BRIDG			
1904 SOUTH LAKESHORE DRIVE 1904 SOUTH LAKESHORE DRI CLERMONT FL 34711 CLERMONT FL 34711			₹IVE		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 11/25/1996			
<del></del>	Place of Business	2a. Mailing Address			4. FEI Number	A	oplied For	
21		26			59-3412201		ot Applicable	1
Suite, Apt.	•	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Additional equired	·   ·
City & Stat	te	City & State			Election Campaign Financing     Trust Fund Contribution		May Be to Fees	
Zip	Country 25	Zip 30	Country		This corporation owes the current year Interpretation     Personal Property Tax.	tangible	□No	
	9. Name and Address of Curre				10. Name and Address of New Registered			Į
KAY	'E, EDWARD M		81	Name	*		-	ı
1904 SOUTH LAKESHORE DRIVE				Street Addre	ess (P.O. Box Number is Not Acceptable)		1	ı
	DMONT EL 04744		83		カー・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	けんしょ 見いばき 行き機	1 (1974) S (S to 11-2)	
	RMONT FL 34711							
	RMONT FL 34711			City	FL.	85 Zip	Code	
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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, with all other like empowered

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE

☐ Change

☐ Addition

**FILED** 

Feb 10, 1999 8:00am

**Secretary of State** 

02-10-1999 90068 015 \*\*\*150.00