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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Namo P97000008724 (1)

K & C ENTERPRISES & SERVICES, INC.

May 06 1998 8:00am

Secretary of State

Fillicipairia	ice of business	IVIE	ailing Address			i		
S200 MINTON ROAD N.W. 5200 MINTON ROAD N.W. PALM BAY FL 32907 PALM BAY FL 32907								
						DO NOT WRITE IN	THIS SPACE	7
						3. Date Incorporated or Qualified		•
						01/29/1997		
2. Principal	Place of Business	28.	Mailing Address			4. FEI Number		Applied For
21 743	PEGUIN AVENUE, NE	26	743 PENL	William Au	Carde H	DE 59-3421485	<u> </u>	Not Applicable
Suite, Apt		. 1777	Suite, Apt. #, etc.		anvej .	_ i	\$8.	75 Additional
22		27				5. Certificate of Status Desired L		ee Required
City & Sta	ate		City & State			6. Election Campaign Financing		.00 May Be
23 PAN	MBAY , FL	28	PALMBA	V. FL		Trust Fund Contribution		dded to Fees
<b>Z</b> ip	Country		Zip	Cour	itry	8. This corporation owes or has paid		
24 329	07 25	29	32907	30		Personal Property Tax due June 30		No
	9. Name and Address of Currer	nt Regist				10. Name and Address of New Regis		
	ones, celeste M				Name			
	200 MINTON ROAD NW			-	50 0 14	(6.0.8		
	ALM BAY FL 32907			ľ	Street Ac	ddress (P.O. Box Number is Not Acceptable)	tr.	
<b>.</b> 	PLIN DATTE OLSOT			<u> </u>	33	PENGUIN AVENUE, A	Z <u>.                                    </u>	
ı				[7	City	AMBAY orporation submits this statement for the purp	85	Zip Code
dd Diversion	1007 007		07 41 00 TL - 1 00		<u> </u>	LM BAY	FL "	32907
office or	registered agent, or both, in the State	of Florid	ta. Such change wa	is authorized	by the corpo	orporation submits this statement for the purp ration's board of directors. I hereby accept the	oose of chang he appointme	ging its registered int as registered
agent. I	am familiar with, and accept the oblig	ations of,	, Section 607.05 <b>05</b> ,	Florida Statu	tes.	, ,	• •	v
SIGNATURE								
10	Signature, typind or printed name of registered age OFFICERS AN				Agent signature re	<u> </u>	DATE DIDE	07000 111 40
12.	OF ICE NO AN	D UITE.C.	DELETE	13.	, 1,	ADDITIONS/CHANGES TO OFFICER		
=			[_] OLLUI	1.1 101		CONTRACTOR PIERS. /TIES	70. LJ VII	ange Muunon
NAME	· ·			1.2 NAM	1L   J	(AVBN W. JONES 143 POKULIN AVBNUE, N	i Ei	
STREET ADDRESS							<b>P</b>	
CITY-ST-ZIP	<del>                                     </del>		DUETE		-ST-ZIP	PALM BAY, FL 32907	По	Ital a cere.
TITLE			☐ DELETE	2.1 TITL		IP/SEC.	L. Ch	ange 🔣 Addition
NAME				2 2 NAM	1E   C	ELBSTE M. JONES		
STREET ADDRESS				2 3 STR	EET ADDRESS	143 PENGUIN AVENUE,	NB	
CITY-ST-ZIP				2. 4 Crī	Y-SI-ZIP	PALM BAY, FL 32907		
TITLE .			☐ DELETE	3 1 TITL	ŧ	• •	L Ch	ange L Addition
NAME				3.2 NAM	16			
STREET ADDRESS				3.3 STR	EE1 ADDRESS			
CITY-ST-ZIP			·	3.4. CIT	Y-S1-ZIP			
TITLE			☐ DELETE	4.1 1(1)	E		Cha	ange 🔲 Addition
NAME				4. 2 NAI	AE			
STREET ADDRESS				4.3 STR	EET ADDRESS			
CITY-ST-ZIP				4.4 CIT	'-ST-ZIP			
TITLE			DELETE	5.1 TITE			☐ Cha	ange Addition
NAME				5.2 NAN				
STREET ADDRESS	1				EFT ADDRESS			
CITY-ST-ZIP	1				'-SI-ZIP			
TITLE			DELETE	61 HTL	<del></del>		☐ Cha	ange
NAME			DELETE				UII	ango Auunudh
	1			6.2 NAN	<b>)</b>			
STREET ADDRESS				6.3 STR	EET ADDRESS			
CITY+ST-ZIP	1				- 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 13 if changed, or on an attachment with an address.

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