

APR-29-1998 12:33

FILE NOW: FILING FEE AFTER MAY 1ST IS \$500.00

FILED

May 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P-97000018875			
1. Corporation Name KUTAY ENTERPRISES, INC.			
Principal Place of Business 731 LYONS RD APT. 16101 COCONUT CREEK, FL. 33063		Mailing Address SAME.	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 731 LYONS RD	
22 City & State		27 Suite, Apt. #, etc.	
23 Zip		28 COCONUT CREEK FL	
29 Country		30 Zip	
		31 33063	
		32 COUNTRY	
		33 BROWARD	
3. Date Incorporated or Qualified		4. FEI Number	
2/27/97		59-3489526	
5. Certificate of Status Desired		Applied For	
☒ \$8.75 Additional Fee Required		☐ Not Applicable	
6. Election Campaign Financing		7. This corporation owes or has paid the current year Intangible	
☐ \$5.00 May Be Added to Fees		Personal Property Tax due June 30. ☐ Yes ☒ No	
8. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ANTHONY G. COLEMAN JR. 4900 N.W. 15TH ST MARGATE, FLORIDA 33063		81 Name STEPHEN P. TAYLOR	
		82 Street Address (R.O. Box Number is Not Acceptable)	
		731 LYONS RD APT 16101	
		83 City	
		COCONUT CREEK FL	
		84 Zip Code	
		33063	
11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.			
SIGNATURE STEPHEN D. TAYLOR		STEPHEN D. TAYLOR 4/29/98	
Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when renewing) DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE SECRETARY		1.1 TITLE PRES	
NAME LINDA KULICK		1.2 NAME PRESIDENT	
STREET ADDRESS 731 LYONS RD APT 16101		1.3 STREET ADDRESS STEPHEN D. TAYLOR	
CITY - ST - ZIP COCONUT CREEK FL 33063		1.4 CITY - ST - ZIP 731 LYONS RD APT 16101	
TITLE		2.1 TITLE REGISTERED AGENT	
NAME		2.2 NAME STEPHEN D. TAYLOR	
STREET ADDRESS		2.3 STREET ADDRESS 731 LYONS RD APT 16101	
CITY - ST - ZIP		2.4 CITY - ST - ZIP COCONUT CREEK FL 33063	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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: STEPHEN D. TAYLOR		STEPHEN D. TAYLOR PRES 4/29/98	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	
		40000254000064 954-973-7536	
		-05/29/98--01015--029	
		***158.75	

CR2E034 (10/97)