PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000024735

1. Corporation Name

KENNEDY REAL ESTATE HOLDINGS, INC.

Principal Place	of Business	Mailing Address		1 19911091 114	IMILI 1881 MAIL ABILI ABILI	***************************************	15181 8111 1881
	RO BLVD STE 101	600 W HILLSBORO BLVD STE 1	01				
DEERFIELD BEA	ICH FL 33441	DEERFIELD BEACH FL 33441			DO NOT WRITE IN THIS SPACE		
				3. Date incorporat	ed or Qualifed	,	
				03/14/1997			ļ
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	.	App	olied For
21		26		65-0741744		Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt#, etc. ~			<u> </u>	* \$8.75 A	dditional
22		27		5. Certifcate of St		Fee Rec	quired
City & State	9	City & State		6, Election Campa	eign Financing	\$5.00	May Be
23		28	_	Trust Fund Cor	ntribution	Added to	Fees
Zip	Country		Country	•	n owes the current year Ir		\
24		29 30		Personal Prope			□No
	9. Name and Address of Current	t Registered Agent			dress of New Registered	Agent	
VENI	NEDV DOBEDT N		81 Nam				
KENNEDY, ROBERT N 600 W HILLSBORO BLVD STE 101 DEERFIELD BEACH FL 33441			82 Stree	82 Street Address (P.O. Box Number is Not Acceptable)			
DEE	RFIELD BEACH FL 33441		83				
			84 City		FI	85 Zip C	ode
office or re agent. Fai	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligat	of Florida. Such change was author	nzea by the col	d corporation submits this st poration's board of directors	atement for the purpose of thereby accept the appo	or changing its i	registered gistered
SIGNATURE				a required when reinstation)	DATE	_	
	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: Regis	stered Agent signatur	required when reinstating)	DATE ANGES TO OFFICERS A	ND DIRECTO	RS IN 12
12.	OFFICERS AN	t and title if applicable. (NOTE: Regis	stered Agent signatur		DATE ANGES TO OFFICERS A	ND DIRECTO	RS IN 12
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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 supplied 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 tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in that an address, with all other like empowered. officer or director of the corporations and the services and the services of the corporation and the services are services as a service of the services are services are services as a service of the services are services as a service of the

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

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Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90069 025 ***150.00