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FILED
Jun 23 1998 8:00 am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000030156 (8)
1. Corporation Name

ELI KAUFFMAN ENTERPRISES, INC.



Principal Place of Business

4928 BELL MEADE DRIVE
SARASOTA FL 34232

Mailing Address

4928 BELL MEADE DRIVE
SARASOTA FL 34232

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/02/1997

4. FEI Number

65-0810945

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 2150 59th ST

Suite, Apt. #, etc.

22 City & State

23 Sarasota FL

24 Zip

34243

Country

25 USA

2a. Mailing Address

26 2150 59th ST

Suite, Apt. #, etc.

27 City & State

28 Sarasota FL

29 Zip

34243

Country

30 USA

9. Name and Address of Current Registered Agent

LANGDON ACCOUNTING & TAX SERVICE, INC.
% ALLEN E. LANGDON
125 FIRST AVE.
NOKOMIS FL 34275-4242

10. Name and Address of New Registered Agent

81 Name

Langdon Accounting & Tax Service, Inc.

82 Street Address (P.O. Box Number is Not Acceptable)

2198 Princeton ST, Suite 12

83

84 City

Sarasota

FL

85 Zip Code

34237

11. Pursuant to the provisions of Sections 607.0502 and 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Allen E. Langdon / Pres.

2/19/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME KAUFFMAN, ELI D
STREET ADDRESS 4928 BELL MEADE DRIVE
CITY-ST-ZIP SARASOTA FL 34232

TITLE D ☐ DELETE

NAME KAUFFMAN, BECKY J
STREET ADDRESS 4928 BELL MEADE DRIVE
CITY-ST-ZIP SARASOTA FL 34232

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2150 59th ST
Sarasota FL 34243

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

2150 59th ST
Sarasota FL 34243

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

400000256932

06/23/98 01040 043

***150.00

6.1 TITLE

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:

Elie Kauffman Pres

6/9/98 378-2853

CR2E034 (10/97)