PROFIT CORPORATION ANNUAL REPORT 1998			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		May 18 1998 Secretary of	
KYLIN-K	ASEY, INC.	Ma	2959 (1) ailing Addross			
5401 RIVEREDGE D RIVE TITUSVILLE FL 32780			101 RIVEREDGE DRIVE TUSVILLE FL 32780		DO NOT WRITE IN THI S SP ACE	
					3. Date Incorporated or Qualified	*
	ace of Business	28.	Mailing Address		05/14/1997 ③ FEI Number	Applied For
5401	RIVERENCE.	PR 26	P.O.BOR S	5843	59-3445338	Not Applicable
Suite, Apt. :	#, ei c.	27	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	USVALE FO	28	City & State	F A.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country		Zip	Country	8. This corporation owes or has paid the curre	
3278			52783	30 BREVARD		Yes 🗌 No
00	9. Name and Address of Ci LIER, DARALYN D	urrent Hegist	tered Agent	81 Name	10. Name and Address of New Registered A	gent
	1 RIVEREDGE DRIVE			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
m	JSVILLE FL 32780					
				83		
11. Pursuant t office or re	o the provisions of Sections 607 e gister ed agent, or both, in the	7.0502 and 60 State of Florid	07.1508, Florida Statu la. Such change was	84 City	FL poration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoi	85 Zip Code changing its registered
SIGNATURE	Signature typed or printed name of register OFTICERS		it appenance (NO	84 City	poration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoi	changing its registered
SIGNATURE	Signature typed of primed name of register Of LICE RS	ed agent and the	it appenance (NO	B4 City tots, the above-named corr: authorized by the corporat torida Statutes. 14: Registered Agent signature requir 13. 1,1 TITLE	Doration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoint red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND (changing its registered intment as registered
SIGNATURE	Signature typed of printed name of register Of LICERS VID COLLIER, MARK	ed agent and the	flappelate (NO TORS	B4 City ttes, the above-named corr; authorized by the corporat iorida Statutes. Hegislereo Agent signature requir 13, 1.1 TITLE 1.2 NAME	Doration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoint red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND (changing its registered intment as registered DIRECTORS IN 12
SIGNATURE 12. IITLE NAME STREET ADDRESS	Signature function printed name of Figure Of Figure VTD COLLIER, MARK 5401 RIVEREDGE DRIVE	ed agent and the	flappelate (NO TORS	B4 City tos, the above-named corp. authorized by the corporat torida Statutes. 11. Registered Agent signature requir 13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS	Doration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoint red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND (changing its registered intment as registered
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