## FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 28, 2002 8:00 am Secretary of State **DOCUMENT #** P97000043648 1. Entity Name KWILLY, INC. 05-28-2002 90721 040 \*\*\*150.00 Principal Place of Business Mailing Address 6550 NE 21ST DR 6550 NE 21ST DR 867114 FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0770145 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Năme WILLIAMS, KIRBY Street Address (P.O. Box Number is Not Acceptable) 6550 NE 21ST DR FT LAUDERDALE FL 33308 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Addition WILLIAMS, KIRBY NAME NAME STREET ADDRESS 6550 NE 21ST DR STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33308 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change NAME WILLIAMS, KAYE NAME STREET ADDRESS 6550 NE 21ST DR STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33308 CITY-ST-7IP -TITLE 🖆 Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/8/02

954-782-2004

Daytime Phone #

To Whom It May Concern:

This was originally paid 2/9/02 online. The tracking number is 200004898052. I charged it to my American Express Card (\$150). When it did not show up on this month's statement, I called 850-245-6939 and the operator told me to mail this in, and that there would be no late fee since I thought it had been handled earlier.

Thank you.

J. Krirby Williams

President, Kwilly Inc.

Attachment

#P97000043648

867111