**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000070480

1. Corporation Name

Principal Place of Business

KELSEY 1A1B, INC.

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90212 013 \*\*\*150.00

Mailing Address

	12 SW 31 AVENUE MBROKE PARK FL 33009	PEMBROKE PARK FL 33009			DO NOT WRITE IN THIS	SPACE	<u>.                                    </u>	
					3. Date Incorporated or Qualifed 08/14/1997			
2. 21	Principal Place of Business	2a. Mailing Address 26			4. FEI Number 65-0780828		Applied For Not Applicable	
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional ee Required	
23	City & State	City & State			6. Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees	
	Zip Country	Zip Cou 29 30	untry		<ol><li>This corporation owes the current year In Personal Property Tax.</li></ol>	X□ Yes	□No	
	9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
	COBER CORPORATE AGENTS, INC. 2601 SOUTH BAYSHORE DRIVE 19TH FLOOR			81 Name  Jesse H. Diner  82 Street Address (P.O. Box Number is Not Acceptable)  1946 Tyler St.				
MIAMI FL 33133			83	194	O Tyrer Dr.			
			84		lywood, FL	_	Zip Code 33020	
11	<ol> <li>Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta</li> </ol>	502 and 607.1508, Florida Statutes, the a te of Florida, Such change was authorize	above d by t	-named corpora the corporation's	ition submits this statement for the purpose of board of directors. I hereby accept the appoint	changir intment	ng its registered as registered	

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 4/27/99

SIGNATURE				ired when reinstating) DATE	— \
			gistered Agent signature requi	and married,	1NI 12
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	Addition
urre		ELETE	1.1 TM.E	C) Cliarige	
VAME	KELSEY, CHARLES M JR		1.2 NAME		
STREET ADORESS	1812 SW 31 AVENUE		1.3 STREET ADDRESS		ļ
CITY-ST-ZIP	PEMBROKE PARK FL 33009		1.4 CITY-ST-ZIP		
TITLE		ELETE	2.1 TITLE	☐ Change	Addition
NAME		ï	2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		-
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE	□ D	ELETE	3.1 TITLE	Change	Addition
MAME			3.2 NAME		-
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		ELETE	4.1 TITLE	☐ Change	Addition
VAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		Ì
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		ELETE	5.1 TITLE	☐ Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP			5.4 CITY- ST-ZIP		
TITLE	□ D	ELETE	6.1 TITLE	Change	Addition
NAME			6.2 NAME		Ì
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	' I I I I I I I I I I I I I I I I I I I	PC 4 . 4	4-1-1:	Coetion 440 07(2)(i) Elevido Statutos I further cortifu that the info	rmation

Increasely certainy 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 attackment with an address, with all other like empowered.

4/26/99

954-981-8073