## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000103137 (0) DOCUMENT # P
1. Corporation Name
KEW INDUSTRIES, INC.

## **FILED** Mar 26 1998 8:00am Secretary of State

|--|

ļ														
Principal Place of Business Mailing Address											- The single in this section while delice design	, 11914 <b>49144</b> #1181 1	/1 <b>048</b> 144	JA 1881 1881
25348 2ND STREET 25348 2ND STREET											]			
SUMMERIAND KEY FL 33042 SUMMERIAND KEY FL 33042											DO NOT WRITE IN	N THIS SPACE		
											3. Date Incorporated or Qualified 12/08/1997			***************************************
2. Principal P	lace of Busi	ness		24	. Mailing /	\ddress					4. FEI Number		Ap	plied For
21				26	].,						65-0799 343		No	t Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.						5. Certificate of Status Desired			dditional		
22		27	- <del> </del>						G. Commodic of clades besided	<u> </u>	ee Re	quired		
City & Stati	0	ļ	City & Stale						6. Election Campaign Financing			May Be		
23					28					Trust Fund Contribution				o Fees
Zip Country				Zip Cou				′		8. This corporation owes or has paid				
24 25 Name and Address of Current			29					Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent					J No	
9. Name and Address of Current Registered Agent WILLIAMS, KEITH E										me	10. Name and Address of New Regis	RIGIGO AGGIIL		
25348 2ND STREET									, Na	110				
	MMERLAN						Str	et Addre	ss (P.O. Box Number is Not Acceptable)	)				
30	MAINTEN AT A	DILLII	. 00072					83						
								L	<u> </u>					
								64	Cit	•		FL  85	Zip C	Code
11. Pursuant	to the provis	sions of So	ctions 607.05	02 and	607 1508, I	lorida Statu	ites, th	ne abov	e-nar	ned corpo	oration submits this statement for the pur on's board of directors. I hereby accept t	pose of chang	ging its	s registered
agent. I a	m familiar w	ith and ac	cept the phil	gations	of, Section	607.0505, F	Statute	S.	corporatio	one board or directors. Thereby accept t	the appointme	ادمة	L	
SIGNATURE Signature, typied or posited ranne of registerest agest and title if applicable (NOTE Registere												3-19-	· 48	
12,	Signification (Special		OFFICERS AF			(140)		13.	orit orgi	acure required	ADDITIONS/CHANGES TO OFFICER		CTOR	S IN 12
TITLE	D					DELETE	_	1.1 TITLE		1	Accomplished to the first	Ch		Addition
NAME	WILLIAI	us, keiti	1 E					1.2 NAME					•	_
STREET ADDRESS		2ND STRI						1.3 STREET	ADDRI	ss				
CITY-ST-ZIP	SUMME	erland k	(EY FL 330	42				1.4 City-5	ST-ZIP					
TITLE	D				T.	DELETE		21 TITLE				☐ Cr	ange	Addition
NAME		vis, Bare						2 2 NAME		1				
STREET ADDRESS 25348 2ND STREET					23				ADDR	ss				
CITY-ST-ZIP	SUMME	rland k	42	2.				ST - ZIP						
TITLE						DELETE		3.1 TITLE				☐ Ch	ange	Addition
NAME								3.2 NAME						
STREET ADDRESS							•	3.3 STREET	ADDRE	ss				
CITY - ST - ZIP								3.4. CITY -	ST-ZIP					
TITLE						DELETE		4.1 TITLE				Ch	ange	Addition
NAME							1	4. 2 <b>Nam</b> e						
STREET ADDRESS							ı	4.3 STREET	ADDRE	ss				
CITY-ST-ZIP			·					4.4 CITY - 5	T-ZIP					
TITLE						DELETE		5.1 TITLE				☐ Ch	ange	Addition
NAME								5.2 NAME						
STREET ADDRESS								5.3 STREET	ADDRE	ss				
CITY-ST-ZIP						<del></del>		5.4 C(TY - \$	T-ZIP					
TITLE						DELETE		6.1 TITLE				Ch	ange	Addition
NAME								6.2 NAME						
STREET ADDRESS								6.3 STREET	ADDRE	ss				
CITY-ST-ZIP								6.4 CITY-5	T-ZIP					

14. Thereby 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.