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Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90184 008 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000018354

1. Corporation Name

KITTYHAWKE INVESTMENTS, INC.

Principal Place of Business

4134 GULF OF MEXICO DR, STE 302
LONGBOAT KEY FL 34228
7917 4TH AVENUE WEST
BRADENTON FL 34209

Mailing Address

4134 GULF OF MEXICO DR, STE 302
LONGBOAT KEY FL 34228
7917 4TH AVENUE WEST
BRADENTON FL 34209

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/25/1998

4. FEI Number

65-0816731 160812

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 7917 4TH AVENUE WEST
23 City & State
BRADENTON FL

26 Suite, Apt. #, etc.
27 7917 4TH AVENUE WEST
28 City & State
BRADENTON FL

23 Zip Country
34209 USA

28 Zip Country
34209 USA

9. Name and Address of Current Registered Agent

WATSON, ANDREW
4134 GULF OF MEXICO DR, STE 302
LONGBOAT KEY FL 34228

10. Name and Address of New Registered Agent

81 Name
ANDREW WATSON

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

7917 4TH AVENUE WEST

83

84

City

BRADENTON

FL

85 Zip Code

34209

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

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 PD
NAME WATSON, ANDREW
STREET ADDRESS 4134 GULF OF MEXICO DR, STE 302
CITY-ST-ZIP LONGBOAT KEY FL 34228

TITLE VD
NAME WATSON, WENDY
STREET ADDRESS 4134 GULF OF MEXICO DR, STE 302
CITY-ST-ZIP LONGBOAT KEY FL 34228

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME WATSON ANDREW
1.3 STREET ADDRESS 7917 4TH AVENUE WEST
1.4 CITY-ST-ZIP BRADENTON FL 34209

2.1 TITLE VD
2.2 NAME WATSON WENDY
2.3 STREET ADDRESS 7917 4TH AVENUE WEST
2.4 CITY-ST-ZIP BRADENTON FL 34209

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

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/99

Date

Daytime Phone #

CR2E034 (11/98)