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

PŘOFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P98000046112

KIS BACING ENGINES, INC.

-	oned Endines, mo-								
Principal Plac	ce of Business	Mailing Address				(() 48 391 86 341 14 111 6 8 111 (IRIA (IRI 1881	
1142 OLD OKEECHOBEE RD. WEST PALM BEACH FL 33401 1142 OLD OKEECHOBEE RD. WEST PALM BEACH FL 33401					3. Date Incorporated or	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
Principal Place of Business 2a. Mailing Address					05/20/1998 4. FEI Number	<u> </u>	Apr	lied For	
21 26					65-08419	7.5		Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status De	esired 🗀	\$8.75 A		
City & State City & State 28				6. Election Trust Fu		*	\$5.00 .1 Added to	•	
Zip				У	8. This corporation owes the current year Intangible Personal Property Tax. ☐ No			□No	
	9. Name and Address of Curren				10. Name and Address	of New Registered	Agent		
SPARKS, KEVIN 1142 OLD OKEECHOBEE RD. WEST PALM BEACH FL 33401				Name Street	Address (P.O. Box Number is No	t Acceptable)			
				4 City		FL	85 Zip C	ode	
office or agent. I a	Signature, Sped of printed pame of registered agen-	on Florida. Such change was autions of, Section 607.0505, Floridate and title if applicable. (NOTE: F	thorized b da Statute Registered Ag	y the corpo	equired when reinstating)	DATE DATE	125/9	3	
12.	OFFICERS AN	ひ ひじきんてんりく	13.		ADDITIONS/CHANGES		NO DIRECTO		
TITLE	T""		44777.5				Change		
NAME STREET ADDRESS		DELETE		ET ADDRESS	Keur Sparks 11420 Ho Keech	nobec Rd	☐ Change	Addition	
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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 attacyment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: X

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90051 020 ***150.00