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03-14-1999 90009 033 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P98000061326

1. Corporation Name KILLIAN REAL ESTATE, INC.

Principal Place of Business 3008 LAKE ELLEN DRIVE TAMPA FL 33818

Mailing Address 3008 LAKE ELLEN DRIVE TAMPA FL 33818

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/10/1998

4. FEL Number

59 3524985

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 21 7815 N. DALEMABRY

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc. 208

27 City & State

23 TAMPA, FL

28 Zip Country

24 33614 25 Hillsborough

29 Zip Country

30

9. Name and Address of Current Registered Agent

KILLIAN, DANIEL S 3008 LAKE ELLEN DRIVE TAMPA FL 33818

10. Name and Address of New Registered Agent

81 Name KATHAN DANIEL S  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City LAKELAND FL 85 Zip Code

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] Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

Table with 5 rows for Officers and Directors. Each row includes Title, Name, Street Address, and City-ST-ZIP. Includes a 'DELETE' checkbox for each entry.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 6 rows for Additions/Changes to Officers and Directors. Each row includes Title, Name, Street Address, and City-ST-ZIP. Includes checkboxes for 'Change' and 'Addition'.

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 person or persons 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] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/198)