

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91783 016 ***150.00

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DOCUMENT # P98000062512

1. Entity Name
KIM KELLAR ANTIQUES, INC.



Principal Place of Business
**3020 NORTH FEDERAL HIGHWAY, UNIT #8-R
PLAZA 3000
FORT LAUDERDALE FL 33306**

Mailing Address
**264 CODRINGTON DR.
LAUDERDALE BY SEA FL 33308**



2. Principal Place of Business
264 Codrington Dr.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Laud. By Sea, FL

City & State

4. FEI Number **65-0869043**

Applied For
Not Applicable

Zip **33308** Country **Broward**

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KELLAR, KIM
264 CORINGTON DR
LAUDERDALE BY THE SEA FL 33308**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Kim Kellar**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **KELLAR, KIM**
STREET ADDRESS **3020 NORTH FEDERAL HIGHWAY, UNIT #8-R**
CITY-ST-ZIP **FORT LAUDERDALE FL 33306**

TITLE ☒ Change ☐ Addition
NAME **264 Codrington Dr.**
STREET ADDRESS **264 Codrington Dr.**
CITY-ST-ZIP **Lauderdale By Sea, FL 33308**

TITLE **V** ☐ Delete
NAME **KELLAR, JOHN**
STREET ADDRESS **3020 N FEDERAL HWY UNIT 8-R**
CITY-ST-ZIP **FORT LAUDERDALE FL 33306**

TITLE ☒ Change ☐ Addition
NAME **264 Codrington Dr.**
STREET ADDRESS **264 Codrington Dr.**
CITY-ST-ZIP **Lauderdale By Sea, FL 33308**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 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

4/28/03 954-491-8430
Date Daytime Phone #

CR2E034 (10/02)