

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2004 8:00 am
Secretary of State

03-12-2004 90020 025 ***158.75

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1. Entity Name
KENNER CONSTRUCTION INCORPORATED



Principal Place of Business

PO BOX 565636
MIAMI, FL 33256
7520 Red Rd
SUITE E
33148

Mailing Address

PO BOX 565636
MIAMI, FL 33256
7520 Red Rd
SUITE E
33148



DO NOT WRITE IN THIS SPACE

03042004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0849830

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GOMBERG, KENNETH
13644 SW 92ND CT
MIAMI, FL 33176

**DO NOT WRITE
IN THIS SPACE**

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

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, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	GOMBERG, KENNETH
STREET ADDRESS	13644 SW 92 COURT
CITY- ST- ZIP	MIAMI, FL 33176
TITLE	DVST
NAME	GOMBERG, JEANETTE
STREET ADDRESS	1 GROVE ISLE DRIVE, SUITE 605
CITY- ST- ZIP	CORAL GABLES, FL 33133
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jeannette Gomburg Sec

3/18/04 305-6658222