

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 04, 2001 8:00 am
Secretary of State

06-04-2001 90004 008 ***550.00

DOCUMENT # P98000081534

1. Entity Name

KAI Limited, INC.

Principal Place of Business

Mailing Address

1650 West McNab Road 1650 West McNab Road
 Ft. Lauderdale, Florida Ft. Lauderdale, Florida;
 33309 33309

00070843

2. Principal Place of Business

1650 West McNab Rd

3. Mailing Address

1650 West McNab Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ft. Lauderdale, Fl

City & State

Ft. Lauderdale, Fl

4. FEI Number

65-0866474

Applied For

Not Applicable

Zip

33309

Country

USA

Zip

33309

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

Steven Eisen berg
 3109 Stirling Rd Ste 101
 Ft. Lauderdale, Fl 33312

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
 (See criteria on back)



FILE NOW!!!

After MAY 1, 2001

Make Check Payable to

FE-15: \$150.00

Fee will be \$550.00

Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	Eisen berg, Steven	
STREET ADDRESS	3109 Stirling Rd Ste 101	
CITY-ST-ZIP	Ft. Lauderdale Fl 33312	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	President	☐ Delete
NAME	Pedersen, James	
STREET ADDRESS	1650 W McNab Rd	
CITY-ST-ZIP	Ft Lauderdale, FL 33309	
TITLE	Tresaurer	☐ Delete
NAME	Wright, Marjorie	
STREET ADDRESS	1650 W McNab Rd	
CITY-ST-ZIP	Ft Lauderdale, Fl 33309	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

13. 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 11 or Block 12 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

5-28-01

9549578586

Date

Daytime Phone #

CR2E034 (11/00)