

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P98000082097

1. Corporation Name

KERN-HAUS AMERICA, CORP.

Principal Place of Business

424 SW 37TH TERR
CAPE CORAL FL 33914

Mailing Address

424 SW 37TH TERR
CAPE CORAL FL 33914

FILED

99 SEP 29 PM 1:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/22/1998

4. FEI Number

☒ Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fec 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

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 1505 SE 40th St.

22 Ste. C

23 Cape Coral FL

24 33904

2a. Mailing Address

26 1505 SE 40th St.

27 Ste. C

28 Cape Coral FL

29 33904

30 U.S.A

9. Name and Address of Current Registered Agent

DEROUEN, SHELLY A
1953 COLONIAL BLVD
FT MYERS FL 33907

81 Name H.S. Blair & Associates, Inc.
82 Street Address (P.O. Box Number is Not Acceptable)
1505 SE 40th St.
83 Ste. C
84 City Cape Coral FL 85 Zip Code 33904

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

S. De Rocco

Vice Pres

03-23-99

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

PTD BECKER, HAROLD 424 SW 37TH TERR CAPE CORAL FL 33914

VD HILLE, HEINZ-DIETER 424 SW 37TH TERR CAPE CORAL FL 33914

S DEROUEN, SHELLY A 1953 COLONIAL BLVD FT MYERS FL 33907

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

11 TITLE NAME

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

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 attachment with an address, with all other like empowered.

SIGNATURE:

Harold Becker

8/29/99

941-549-9499

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

044077

CR2E034 (1/1/98)