Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 12, 2001 8:00 am Secretary of State DOCUMENT # P9900001110 1. Entity Name KMG ENTERPRISES, INC. -12-2001 90175 015 ***150.00 Principal Place of Business Mailing Address 2809 S OCEAN BLVD 3114 SOUTH OCEAN BOULEVARD HIGHLAND BEACH FL 33487 SUITE 207 HIGHLAND BEACH FL 33487-2530 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0887467 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name AHO, JOHN D Street Address (P.O. Box Number is Not Acceptable) 640 C OCEAN AVE #8 **BOYNTON BEACH FL 33435** Zip Code City FL 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 nt and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Delete TITLE ☐ Change ☐ Addition TITLE O'CONNOR, DENNIS J STREET ADDRESS 3114 SOUTH OCEAN BOULEVARD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HIGHLAND BEACH FL 33487-2530 Change TITI F ☐ Delete ☐ Addition NAME GIORDANO, KAREN A NAME STREET ADDRESS 3114 SOUTH OCEAN BOULEVARD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HIGHLAND BEACH FL 33487-2530 TITLE TITLE ☐ Change Addition ☐ Delete NAME GIORDANO, ANTHONY V NAME STREET ADDRESS 3114 SOUTH OCEAN BOULEVARD STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP HIGHLAND BEACH FL 33487-2530 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS 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.