

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000011342
 1. Entity Name
 K & H ENTERPRISES, INC.



Principal Place of Business Mailing Address
 3830 46TH AVENUE SOUTH 3830 46TH AVENUE SOUTH
 ST. PETERSBURG, FL 33711 ST. PETERSBURG, FL 33711



01082004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3559196	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 KRUEGER, PAUL L
 3830 46TH AVENUE SOUTH
 ST. PETERSBURG, FL 33711

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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 _____ (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 NAME STREET ADDRESS CITY - ST - ZIP	PAST HELLER, STEPHEN M 2346 LITTLE COUNTRY RD PARRISH, FL 34219
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VAS HELLER, DOROTHY F 2346 LITTLE COUNTRY RD PARRISH, FL 34219
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT KRUEGER, PAUL L 3830 46TH AVE S SAINT PETERSBURG, FL 33711
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS KRUEGER, LEE S 3830 46TH AVE S SAINT PETERSBURG, FL 33711
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 01/13/04-80066-018 150.00

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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: Paul L Krueger PAUL L KRUEGER 9 JAN 04 727 867-2387
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #