

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 07, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000011342**

1. Entity Name  
**K & H ENTERPRISES, INC.**



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

Mailing Address  
**3830 46TH AVENUE SOUTH  
ST. PETERSBURG, FL 33711**



01042005 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 ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**KRUEGER, PAUL L  
3830 46TH AVENUE SOUTH  
ST. PETERSBURG, FL 33711**

**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 file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

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

000000173265  
01/07/05-80011-019 150.00

**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:**

*Paul L Krueger*  
**Paul L Krueger**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4 Jan 05 12:17 867-2387*  
Date Daytime Phone