

2000 UNIFORM BUSINESS REPORT (UBR)

4

DOCUMENT # P99000014807

1. Entity Name

K.S.N., INC.

FILED
May 04, 2000 8:00 am
Secretary of State

04-10-2000 90076 034 ***150.00

Principal Place of Business Mailing Address
5800 N.W. 60 STREET 5800 N.W. 60 STREET
PARKLAND FL 33067 PARKLAND FL 33067-4468



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-9043431		Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
Zip	Country	Zip	Country			

6. Name and Address of Current Registered Agent BORRELLO, ROGER F ESQ 300 N.W. 70 AVENUE SUITE 301 PLANTATION FL 33317		7. Name and Address of New Registered Agent Name Ljiljana Krslovic Street Address (P.O. Box Number is Not Acceptable) 5800 NW 60 St City Parkland FL Zip Code 33067	
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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.

SIGNATURE Ljiljana Krslovic Ljiljana Krslovic DATE 4-4-00
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PRES NAME Ljiljana Krslovic STREET ADDRESS 5800 NW 60 St CITY-ST-ZIP Parkland FL 33067	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE SEC NAME Ljiljana Krslovic STREET ADDRESS 5800 NW 60 St CITY-ST-ZIP Parkland FL 33067	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Ljiljana Krslovic Ljiljana Krslovic DATE 4-4-00 DAYTIME PHONE # 954-345-3500
(Signature and typed or printed name of signing officer or director)

CR2034 (9/99)