

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 14, 2000 8:00 am
Secretary of State

04-14-2000 90129 013 ***150.00

DOCUMENT #

1. Entity Name

KPSL.COM, INC.

Principal Place of Business

107900 Overseas Hwy.
Key Largo, FL 33037

Mailing Address

107900 Overseas Hwy.
Key Largo, FL 33037

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0955872

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Spiegel & Utrera, P.A.
343 Almeria Avenue
Coral Gables, FL 33134

7. Name and Address of New Registered Agent

Name

Det H. JOKS, P.A.

Street Address (P.O. Box Number is Not Acceptable)

10689 N. Kendall Drive

Suite 310

City

Miami

FL

Zip Code

33176

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Det H. JOKS, Pres.

4-10-2000

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

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. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete

NAME PD
STREET ADDRESS Susan Le Blanc
CITY-ST-ZIP 107900 Overseas Hwy.
Key Largo, FL 33037

TITLE ☐ Delete

NAME STD
STREET ADDRESS Ken A. Papineau
CITY-ST-ZIP 107900 Overseas Hwy.
Key Largo, FL 33037

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

NAME
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.

SIGNATURE:

Susan Le Blanc, President
SUSAN LE BLANC

Date

4-4-2000

Daytime Phone #

305-451-1133

CR2E034 (9/99)