

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Jul 28 1998 8:00am**  
**Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1998**  
 FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT #**  
 1. Corporation Name  
**KAYLANDCO, INC.**  
**801607**

Principal Place of Business  
**1201 US HWY 1 SUITE 46 N PALM BEACH, FL 33408**  
 Mailing Address  
**P.O. BOX 2987 STUART, FL 34995**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**9/20/90**

4. FEI Number  
**65-0303392**  
 Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

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

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business  
**21 SAME**  
 Suite, Apt. #, etc.  
**22**  
 City & State  
**23**  
 Zip  
**24** Country  
**25**

2a. Mailing Address  
**26**  
 Suite, Apt. #, etc.  
**27**  
 City & State  
**28**  
 Zip  
**29** Country  
**30**

**9. Name and Address of Current Registered Agent**  
~~CHARLES R. HIGGINS~~  
~~1889 ASCOT RD.~~  
~~JUNO ISLES, FL 33408~~

**10. Name and Address of New Registered Agent**

81 Name  
**ARTHUR C. KUJAWSKI**

82 Street Address (P.O. Box Number is Not Acceptable)  
**151 SW S RIVER DR #103**

83  
**STUART, FL 34997**

84 City  
**FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Arthur C. Kujawski* **July 12, 98**  
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**12. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE <b>PST ARTHUR KUJAWSKI 151 SW S RIVER DR. #103 STUART, FL 34997</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**600002502935**  
**-07/30/98--01071--017**  
**\*\*\*150.00**

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Arthur C. Kujawski* **July 12, 98** **561 220-3212**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/97)

2

KAYLANDCO, INC.  
1201 US HWY 1  
SUITE 46  
NORTH PALM BEACH, FL 34997

July 9, 1998

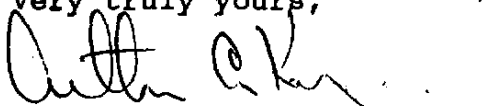
Annual Reports Filings  
Division of Corporations  
PO Box 6327  
Tallahassee FL 32314

Gentlemen,

Enclosed is our annual report for the year 1998. In April, we requested a new form as one was not received. Unfortunately, a replacement form was not received.

We are filing this form late as a result. Please do not assess the penalty as we, in good faith, attempted to file the report timely.

Very truly yours,

  
Arthur Kujawski, President

AK/tz