

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2000 8:00 am
Secretary of State
 01-24-2000 90029 018 ***158.75

DOCUMENT # S07126

1. Entity Name

KCL ENTERPRISES, INC.

Principal Place of Business

Mailing Address

5349 NOB HILL RD
 SUNRISE FL 33351

P.O. BOX 14022
 TALLAHASSEE FL 32317-4022

2. Principal Place of Business

10001 NW 50th ST

3. Mailing Address

PO BOX 100917

Suite, Apt. #, etc.

SUITE #201G

Suite, Apt. #, etc.

City & State

SUNRISE

City & State

FT. LAUDERDALE FL

Zip

33351

Country

BROWARD

Zip

33310

Country

BROWARD

4. FEI Number

65-0234208

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LATINE, KENNETH
 1447 DEN HOLM DR
 TALLAHASSEE FL 32312

7. Name and Address of New Registered Agent

Name LATINE, KENNETH

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

4500 NW 46th ST

City TAMARAC

FL

Zip Code 33319

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 KENNETH LATINE
Kenneth Latine President

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/17/00

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 P ☒ Delete
 NAME LATINE, KENNETH
 STREET ADDRESS 1447 DEN HOLM DR
 CITY-ST-ZIP TALLAHASSEE FL 32312

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT ☒ Change ☐ Addition
 NAME LATINE, KENNETH
 STREET ADDRESS 10001 NW 50th ST - SUITE #201G
 CITY-ST-ZIP SUNRISE, FL 33351

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: Kenneth Latine (KENNETH LATINE)
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/00

Date

954-748-0011

Daytime Phone #

CR2E034 (9/99)