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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

•	MENT # S1842 ENTERPRISES OF S.W. FL	• •		4 18 0 10 10 10 10 10 10 11 20 10 10 10 10 10 10 10 10 10 10 10 10 10	
Principal Place	e of Business	Mailing Address			
3341 23RD AV		3341 23RD AVE. SW		1	
NAPLES FL 34		NAPLES FL 33964		DO NOT WOLL	TIMETHIO ODAOC
U\$				3. Date Incorporated or Qualified	E IN THIS SPACE
				11/09/1990	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0225849	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State)	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
Zip	Country	7ip	Country	Trust Fund Contribution 8. This corporation owes or has pa	
24	25	<u> </u>	30	Personal Property Tax due June	_ · ·
	9. Name and Address of Curre			10. Name and Address of New Re	
KIS	ER, RORY		81 Name		
3341 23RD AVE. SW NAPLES FL 33964			82 Street Addr	ess (P.O. Box Number is Not Acceptal	ble)
			<u> </u>		
			83		
			84 City		85 Zip Code
44 0	- 4	00 10074500 51 11 00 11			FL 65 Zip coos
office or re	i o the provisions of Sections 607.05 e giste red agent, or both, in the Stat	.02 and 607.1508, Florida Statute .e of Florida. Such change was a	es, the above-named corp outhorized by the corporat	oration submits this statement for the pion's board of directors. I hereby acce	ourpose of changing its registered pt the appointment as registered
agent. Lar	m lamiliar with, and accept the obli	gations of, Section 607.0505, Flo	rida Statutes.	-	
SIGNATURE	Signature, typod or printed name of registered as	cont and title disprile able (NIOTS	: Registered Agent signature requir	od whop relectation	DATE
12,		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE		DELETE	1.1 TITLE		Change Addition
NAME	Kiser, Rory		1.2 NAME		
STREET ADDRESS	3 341 23RD AVE. SW		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL	- I not the	1.4 City-St-ZIP		
TITLE	D	☐ DELETE	21 TITLE		☐ Change ☐ Addition
KAME	KISER, JEAN		2.2 NAME		
STREET ADDRESS	3341 23RD AVE. SW NAPLES FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MAPLES PL	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
HAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 C(TY-ST-ZIP 6.1 T)TLE		Change Addition
NAME			6.2 NAME		E change E rodition
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		
14. I hereby c	ertify that the information supplied	with this filing does not qualify fo	r the exemption stated in	Section 119.07(3)(i), Florida Statutes.	further certify that the information
Officer or 0	on t his annual report or supplemen director of the corporation or the rec or Bl ock 13 if changed, or op an att	ceiver or trustee empow ered to e	urate and that my signature execute this report as requ	re shall have the same legal effect as i uired by Chapter 607, Florida Statutes;	t made under oath; that I am an and that my name appears in

SIGNATURE:

4/28/98

FILED

May 06 1998 8:00am

Secretary of State