

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 29 AM 8:45

DOCUMENT # S18978 (4)

1. Corporation Name
K & M BUSINESS CONSULTANTS, INC.

Principal Place of Business
P O BOX 2674
BOCA RATON FL 33427

Mailing Address
P O BOX 2674
BOCA RATON FL 33427

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/12/1990
3a. Date of Last Report 05/01/1994

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25
26 847 Coventry St
27 Suite, Apt. #, etc.
28 Boca Raton, FL
29 33487
30 USA

4. FEI Number 65-0239041
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 has liability for intangible tax under S. 194.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARTHA E. SAMUELS
847 COVENTRY ST.
BOCA RATON FL 33487

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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

Signature, typed or printed name of registered agent and the corporation

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS
1. TITLE VP
2. NAME BUTLER, LINDA D.
3. STREET ADDRESS 916 NW 46TH ST
4. CITY, ST, ZIP POMPANO BEACH FL
5. TITLE DP
6. NAME SAMUELS, MARTHA F.
7. STREET ADDRESS 847 COVENTRY ST
8. CITY, ST, ZIP BOCA RATON FL
9. TITLE
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100. CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. 1. TITLE VP
2. 2. NAME Butler, Karen
3. 3. STREET ADDRESS 316 NW 46 St
4. 4. CITY, ST, ZIP Pompano Bch, FL 33064
5. 5. TITLE
6. 6. NAME
7. 7. STREET ADDRESS
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97. 97. TITLE
98. 98. NAME
99. 99. STREET ADDRESS
100. 100. CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: Martha Samuels
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-25-95

Date

Typed Name