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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

S64701

(3)

KAPLAW, INC.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

| Principal Plac | e of Business | Mailing A | ddress | | | T TOOLIGATE LINE BEIST, GEBRY FORTEN TOOLIGE TOTAL BY |
|------------------------|--|---|---------------------------------------|--------------|----------------------|---|
| UNIT 408 | BEACH ROAD NGS FL 33923 | 3421 BONITA BEACH ROAD UNIT 408 BONITA SPRINGS FL 33923 US | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified |
| 9 Principal P | lace of Business | I Do Mailin | . 6 . | | | 07/02/1991 |
| | IBO OI DUSINESS | 2a. Mailin | 00 H16H | WAY | Vo 1 EAS | 4. FEI Number Applied For |
| Suite, Apt. | # atc | | Apt. #, etc. | | 1. 01/0 | |
| 22 | w, 0.00. | 27 | VITE 1 | 0/, | | 5. Certificate of Status Desired S8.75 Additional Fee Required |
| City & State | e | City & | State | | | A Stantian Communication AF 00 |
| 23 | | 28 R/C | CHMOND | HILL | ONTARI | 6. Election Campaign Financing Trust Fund Contribution 5.00 May Be Added to Fees |
| Zip | Country | Zip | | Coun | try | R This corporation owes or has paid the current year Intendible |
| 24 | 25 | 29 L4 L | 3 182 | 30 | ANADA | Personal Property Tax due June 30. Yes No |
| | 9. Name and Address of Current | Registered A | gent | | | 10. Name and Address of New Registered Agent |
| CAI | PTAIN INVESTMENTS , INC. | | | ı | Name | |
| 3421 BONITA BEACH ROAD | | | | | 2 Street Add | Address (P.O. Box Number is Not Acceptable) |
| | T 408 | | | | Street Add | Address (P.O. Box Number is Not Acceptable) |
| | NITA SPRINGS FL 33923 | | | 1 | 13 | |
| | | | | <u> </u> | | |
| | | | | | City | FL 85 Zip Code |
| 11. Pursuani i | to the provisions of Sections 607.0502 | and 607 1508 | . Florida Statut | es, the abo | ve-named co | corporation submits this statement for the nurrose of changing its registered |
| office or re | egistered agent, or both, in the State o | f Florida, Suct | h change was a | authorized | by the corpora | oration's board of directors. I hereby accept the appointment as registered |
| | and tooch, the obligan | ona oi, occio | 11 001.0303, 1 10 | Jiloa Sialu | .00. | |
| SIGNATURE | Signature, typed or printed name of registered agent | and title if applicab | ole (NOT | E Registered | vgent signature requ | required when reinstating) DATE |
| 12. | OFFICERS AND | DIRECTORS | | 13. | *** | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PSTD | | ☐ DELETE | 1.1 YITL | | ☐ Change ☐ Addition |
| NAME | Kaptyn John | | | 1,2 NAM | E | |
| STREET ADDRESS | 600 HIGHWAY NO. 7 EAST, ST | E 101 | | 1.3 STRI | ET ADDRESS | |
| CITY-ST-ZIP | RICHMOND HILL ON | | | 1.4 CITY | -ST-ZIP | |
| TITLE | | | DELETE | 2.1 TITL | | Change Addition |
| NAME | | | | 2.2 NAM | E | |
| STREET ADDRESS | | | | 2.3 STRE | ET ADDRESS | |
| CITY-ST-ZIP | | | • • • • • • • • • • • • • • • • • • • | 2. 4 CIT | -ST-ZIP | |
| TITLE | | | DELETE | 3.1 TITLI | | Change Addition |
| NAME | | | | 3.2 NAM | | |
| STREET ADDRESS | | | | 3.3 STRE | ET ADDRESS | |
| CITY-ST-ZIP | | | | 3.4. CITY | -ST-ZIP | |
| TITLE | | | DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | | 4. 2 NAM | E | |
| STREET ADDRESS | | | | 4.3 STRE | et address | |
| CITY-ST-ZIP | | | | 4.4 CITY | ST-ZIP | |
| TITLE | | | ☐ DELETE | 5.1 TITLE | | Change Addition |
| NAME | | | | 5.2 NAM | : | |
| STREET ADDRESS | | | | 5.3 STRE | T ADDRESS | |
| CITY-ST-ZIP | | | | 5.4 CITY | ST-ZIP | |

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

Change

___ Addition

FILED

Mar 16 1998 8:00am

Secretary of State

- A GEORGEID AND BERNE DEREN HOURT OARDE EIDE DEREN DEREN BERNE DEREN DEREN DEREN DEREN DEREN DEREN DER EN DER