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

**PROFIT** CORPORATION ANNUAL REPORT

1999

CITY-ST-ZIP°

STREET ADDRESS

NAME



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # V23345**

| <ol> <li>Corporation</li> </ol>              | 1 Name  |                                    |                     |               |  |                   |                      |
|--|---|------------------------------------|---------------------|---------------|--|-------------------|----------------------|
| K C TRA                                      | CTOR SERVICE, INC.  | •.                                 |                     |               | A TRANSFERMINING ATRANS SERVE ASSET ASSET AND  | ALI BIBIL AJBIL ( | NDM DADA KDI         |
|  |   |                                    |                     |               |  |                   |                      |
| Principal Place of Business Mailing Address  |   |                                    |                     |               | f (MMC) Mirain riann leine teile arnar meir armi m   | <u> </u>          | 14 E()   018   ( FOE |
| % KENT MONROE CALDWELL % KENT MONROE CALDWEL |   |                                    | L                   |               |  |                   |                      |
| 13596 151ST LANE NORTH                       |   | 13596 151ST LANE NORTH             |                     |               | DO NOT WRITE IN THIS SPACE   |                   |                      |
| JUPITER FL 334                               | 178   | Jupiter FL 33478                   |                     |               | 3. Date Incorporated or Qualifed   |                   |                      |
|  |   | •                                  |                     |               | 03/23/1992   |                   |                      |
| 2. Principal P                               | lace of Business  | 2a. Mailing Address                |                     | _             | 4. FEI Number  | Ap                | plied For            |
| 21   | 26  |                                    |                     |               | 65-0324878   | No                | ot Applicable        |
| Suite, Apt.                                  | #, etc.   | Suite, Apt. #, etc                 | Suite, Apt. #, etc. |               | 5. Certificate of Status Desired   | \$8.75            |                      |
| 22   | اس ایود <i>با مساحیهٔ بینی</i> د پریا ی د<br>است  | 27                                 |                     |               | 3. Certificate of Otalica Dealford   | Fee Re            |                      |
| City & Stat                                  | y & State City & State  |                                    |                     |               | 6. Election Campaign Financing   |                   | May Be               |
| 23   | 28  |                                    |                     |               | Trust Fund Contribution  | Added             | to Fees              |
| Zip<br>η                                     |   |                                    | Coun                | try           | 8. This corporation owes the current year Int.   | angible<br>Yes    | □No                  |
| 24   | 25]   | 29 30                              | 0                   | _             | Personal Property Tax.  10. Name and Address of New Registered Address |                   |                      |
|  | 9. Name and Address of Currer   | it vedistalen våelir               |                     | B1 Name       | te, reme and readings of them registered   |                   |                      |
| CALDWELL, KENT MONROE                        |   |                                    |                     |               |  |                   |                      |
| 13596 151ST LANE NORTH                       |   |                                    |                     | B2 Street Ade | dress (P.O. Box Number is Not Acceptable)  |                   |                      |
| JUPITER FL 33478                             |   |                                    |                     | 83            | <del></del>  |                   |                      |
| 1  |   |                                    | L                   | _\            |  | <del></del>       |                      |
| ·  |   |                                    |                     | 84 City       | FL   | 85 Zip            | Code                 |
| office or r<br>agent. I a<br>SIGNATURE       | egistered agent, or both, in the State<br>in familiar with, and accept the obligation<br>Signature, typed or printed name of registered age | tions of, Section 607.0505, Florid | ia Statui           | es.           | tion's board of directors. I hereby accept the appoi   |                   | -                    |
| 12.  |   | ID DIRECTORS                       | 13.                 |               | ADDITIONS/CHANGES TO OFFICERS AN   |                   |                      |
| TITLE  | D   | ☐ DELETE                           | 1.1 TITL            | E             |  | Change            | Addition             |
| NAME   | CALDWELL, KENT MONROE   |                                    | 1.2 NAM             | Œ             |  |                   | ,                    |
| STREET ADDRESS                               | 13596 151ST LANE NORTH  |                                    | 1.3 STR             | EET ADDRESS   | •  |                   | ţ                    |
| CITY-ST-ZIP                                  | JUPITER FL  |                                    | 1.4 CIT             | Y-ST-ZIP      |  |                   |                      |
| TITLE  | D   | ☐ DELETE                           | 2.1 TITL            | £             |  | Change            | ☐ Addition           |
| NAME   | CALDWELL, SHEILA D.   |                                    | 2.2 NAM             | AE .          |  |                   | ļ                    |
| STREET ADDRESS                               | 13596 151ST LANE NORTH  |                                    | 2.3 STR             | EET ADDRESS   |  |                   | ļ                    |
| CITY-ST-ZIP                                  | JUPITER FL.   |                                    | •                   | Y-ST-ZIP      |  | Change            | Addition             |
| TITLE  |   | ☐ DELETE                           | 3.1 TTTL            |               |  | □ cliande         | ☐ ₩aaaaaatt t        |
| NAME   |   |                                    | 3.2 NAA             |               |  |                   |                      |
| STREET ADDRESS                               |   |                                    |                     | EETADORESS    |  |                   | •                    |
| CITY-ST-ZIP                                  |   | DELETE                             | -                   | Y-ST-ZIP      |  | Change            | Addition             |
| TITLE  |   |                                    | 4.1 TITL            |               |  | _ Surringe        |                      |
| NAME   |   |                                    | 4. 2 NA             |               |  |                   |                      |
| STREET ADDRESS                               |   |                                    |                     | EET ADDRESS   |  |                   |                      |
| CITY-ST-ZIP                                  |   | ☐ DELETE                           | 5.1 TITE            | Y-ST-ZIP      |  | Change            | Addition             |
| TITLE<br>I NAME                              |   |                                    | 5.2 NAN             |               | -  | _                 | _                    |
|  |   |                                    |                     | REET ADDRESS  |  |                   |                      |
| STREET ADDRESS                               | ì   |                                    |                     |               |  |                   | -                    |

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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME

~SIGNATURE: She

☐ DELETE

Change

Addition

**FILED** 

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90016 005 \*\*\*150.00