

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # V24522

(7)

1. Corporation Name

KART KLEENER, INC.

Principal Place of Business

1665 PALM BEACH LAKES BLVD.  
SUITE 600  
W. PALM BEACH FL 33410

Mailing Address

KART KLEENER  
2225 MONET ROAD  
PALM BEACH GARDENS FL 33410  
US



3. Date Incorporated or Qualified

03/25/1992

3a. Date of Last Report

06/09/1995

4. FEI Number

65-0323052

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. 199.032,  
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 11380 W. TEACH RD.

26 11380 W. TEACH RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 P.B. GARDENS

27 P.B. GARDENS

City & State

City & State

23 FL.

28 FL.

24 33410

25 Palm Beach

29 33410

30 P.B.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHERRY, RICHARD G.  
1665 PALM BEACH LAKES BLVD.  
SUITE 600  
W. PALM BEACH FL

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 title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ DELETE

☐ Change

☐ Addition

☐ DELETE

☐ Change

☐ Addition

☐ DELETE

☐ Change

☐ Addition

☐ DELETE

☐ Change

☐ Addition

☐ DELETE

☐ Change

☐ Addition

☐ DELETE

☐ Change

☐ Addition

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 119.07(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:

Gene Braswell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-8-96 1107-775-0767

Date

Daytime Phone #

CR2E034 (12/95)