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ELORIDA DEPARTMENT DE STATE

PROFIT

Mar 20 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #

1. Corporation Name (5) K & C SALES, INC. Principal Place of Business Mailing Address 9097 MERRIMORE BLVD. 9097 MERRIMORE BLVD. **LARGO FL 34647 LARGO FL 34647** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/10/1992 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-3121739 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MAROUDIS, MARGARET ANN 9097 MERRIMORE BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **LARGO FL 34647** 83 64 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE ☐ Change ___ Addition NAME MAROUDIS. MARGARET ANN 1.2 NAME 9097 MERRIMORE BLVD. STREET ADDRESS 1.3 STREET ADDRESS LARGO FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition 2.1 TITLE Channe TITLE MAROUDIS, CRAIG P. NAME 2.2 NAME 9097 MERRIMORE BLVD. STREET ADDRESS 2.3 STREET ADDRESS LARGO FL CITY-ST-ZIP 2.4 CITY - ST-ZIP DELETE 3.1 TITLE ☐ Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ... Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change DELETE Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP 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 cettly 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 13 if changed, or on an attachment with an address.

FILED

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