

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

CORPORATION  
ANNUAL REPORT  
**1995**



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

APPROVED  
AND  
FILED

MAY 12 1995

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # V58850**

**(1)**

1. Corporate Name:

**KZ ENTERPRISES, INC.**

Principal Place of Business:

**381 HEDGEROW LANE  
TARPON SPRINGS FL 34689**

Mailing Address:

**381 HEDGEROW LANE  
TARPON SPRINGS FL 34689**

DO NOT WRITE IN THIS SPACE

3. Date incorporated (or changed):  
**08/17/1992**

3a. Date of Last Report:  
**04/18/1994**

4. FID Number:  
**59-3143313**

Applied Fee:  
Not Applicable

5. Certificate of Status (Form 1)

**\$8.75 Additional  
Fee Required**

6. Election Campaign Finance and  
Fundraising Contributions

**\$5.00 May Be  
Added to Fees**

8. This corporation has adopted the following tax election:  
Corporate Taxation: ☒ S Corporation ☐ C Corporation

2. Principal Place of Business:

21. **381 HEDGEROW LANE  
TARPON SPRINGS FL 34689**

2a. Mailing Address:

26. **381 HEDGEROW LANE  
TARPON SPRINGS FL 34689**

22. State of Incorporation:

23. City, State:

27. State of Incorporation:

28. City, State:

24. **381 HEDGEROW LANE  
TARPON SPRINGS FL 34689**

25. **381 HEDGEROW LANE  
TARPON SPRINGS FL 34689**

29. **381 HEDGEROW LANE  
TARPON SPRINGS FL 34689**

30. **381 HEDGEROW LANE  
TARPON SPRINGS FL 34689**

9. Name and Address of Current Registered Agent

**DE PALMA, JOHN  
381 HEDGEROW LANE  
TARPON SPRINGS FL 34689**

10. Name and Address of New Registered Agent

81. Name:

82. Street Address (P.O. Box Number is Not Acceptable):

83. City:

84. State:

**FL**

85. Zip Code:

11. I, the undersigned, being a resident qualified person, do hereby certify that the information furnished on this form is true and correct. I understand that anyone who furnishes false or misleading information on this form or who omits material or information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).

Signature:

12. Signature of Registered Agent:

**PVST  
DE PALMA, JOHN J.  
381 HEDGEROW LANE  
TARPON SPRINGS FL 34689**

13. Signature of Officer or Director:

NAME:

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

DATE:

TIME:

PLACE:

WITNESSES:

NOTARY:

FILED:

DATE:

TIME:

PLACE:

WITNESSES:

NOTARY:

FILED:

DATE:

TIME:

PLACE:

WITNESSES:

NOTARY:

FILED:

DATE:

TIME:

PLACE:

WITNESSES:

SIGNATURE:

*John J. De Palma* **JOHN J. DE PALMA**

5-15-95

(813) 934-7221

SIGNATURE AND SEAL OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR