PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90040 020 ***158.75

DOCUI	MENT # V63818			
1. Corporation Name KENNEDY BUILDING & DESIGN, INC.				
1/LIMITED	I DOILDING & DEGIGN, IIV	<i>,</i>		I YORUN AMARIA AMARA MARA MARA MARA KARA BIRAN AMAMI AMAM
Principal Place	e of Business	Mailing Address		(SEIT BILDIS BLIDE HIRE: IDIDI INDU AND
4615 UNIVERSIT		4615 UNIVERSITY ORIVE		
CORAL SPRING US	S FL 33067	CORAL SPRINGS FL 33067 US		DO NOT WRITE IN THIS SPACE
00,//		~/		3. Date Incorporated or Qualifed
,* 				09/14/1992
\vdash tu	ace of Business	2a. Mailing Address	- Dixie H	4. FEI Number Applied For Not Applicable
21 46 41 Suite, Apt.	# of Dixte Hwy	26 Y 7 7 7 7 7 7 Suite, Apt. #, etc.	- DINCH	\$8.75 Additional
22 Suite, Apr.	#, etc.	27		5. Certificate of Status Desired Fee Required
City & State	0 _ 1	City & State		6. Election Campaign Financing \$5.00 May Be
23 BO Ca	Raton, FC	28 BOCa Rat		Trust Fund Contribution Added to Fees
Zip אַ עי	Country	^{Zip} 33431 3	Country	8. This corporation owes the current year Intangible Personal Property Tax Yes Yes
24 334	3 USA 9 Name and Address of Current	120 0 - 100	USA	Personal Property Tax.
	9. Hame and Address of Chilem	registered Agent	81 Name	
Kennedy, Robert R.			82 Street	Robert R - Kennedy t Address (P.O. Box Number is Not Acceptable)
KENNEDY BLDG. & DESIGN, INC.			62 Sueet	(Address (F.O. Box Nulliber is Not Acceptable)
(83 L	4641 N. Dixie Hwy
COR	AL SPRINGS FL 33067		84 City	85 Lip Code
				Boca Raton FL 33931
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.				
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 the ril applicable. (NOTE: Register/d Agent signature required when reinstatung) DATE				
12.	OFFICERS AN	Ø DIRECTORS	1/3.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD .	DELETE	,1 TITLE	P+D &Change Addition
NAME	KENNEDY, ROBERT R		1.2 NAME	Kobart 16 - Kennowy
STREET ADDRESS	4615 UNIVERSITY DRIVE	,	1.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPINGS FL 33067	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	ZOCA RATON, FL 3343/
TITLE NAME	s Kennedy, Røbert R	O OCCCIO	2.2 NAME	Robert R. Kennesy
STREET ADDRESS	4615 UNIVERSITY DRIVE		2.3 STREET ADDRESS	The same of the sa
CITY-ST-ZIP	CORAL SPRINGS FL 33067		2. 4 CITY-ST-ZIP	BOCA Raton, FL 33431
TITLE	_ 2	~ ☐ OELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADORESS	•		3.3 STREET ADDRESS	s .
CITY-ST-ZIP		F1 bereze	3.4. CITY-ST-ZIP	ChangeAddition
TITLE	·	☐ DELETE	4.1 TITLE	
NAME			4, 2 NAME 4,3 STREET ADDRESS	
STREET ADDRESS			4.4 CITY-ST-ZIP	
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS	'		5.3 STREET ADDRESS	s
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS	200 - 200 TALL		6.3 STREET ADDRESS	
CITY-ST-ZIP			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, with all other like empowered.

SIGNATURE

SIGNATION SIGNATION OF STREET OF SIGNAGOFFICER OF DIRECTOR

3/5/99 581-392-1717

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