## 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000013013 FILED Mar 21, 2001 8:00 am Secretary of State

1. Entity Name
P98000013013

KABIL ENTERPRISES, INC.

INCORPORATED 2/9/1998

Principal Place of Business

Mailing Address — SAME —

3304 SAWGRASS VILLAGE CERCLE

## VEDRA BEACH, FL. 32082 A0035297 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VAN LAW, WILLIAM C. JR. 3304 SAWGEASS VILLAGE CIR. Street Address (P.O. Box Number is Not Acceptable) PONTE VEDRA BEACH, FL. Zip Code City FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) DATE d title if applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001, Fee will be \$550.00 -Trust Fund Contribution. -Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PRESIDENT TITLE Change Addition WILLIAM C. VAN LAW NAME NAME 3304 SAWGRASS VILLAGE CIR. STREET ADDRESS STREET ADDRESS PONTE VEDRA BEACH, FL 32082 CITY-ST-ZIP CITY-ST-7IP VICE PRESIDENT TITLE ☐ Change Addition KAY A. UNN LAW NAME NAME 3804 SALYGRA=5, VILLAGE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE:

CITY-ST-ZIE

STREET ADDRESS

CITY-ST-ZIP

NAME

WILLIAM C. VAN LAW JR.

3/13/10, 904-543-0707

03-21-2001 90010 004 \*\*\*150.00

Daytime Phone #

Change

■ Addition