

# 2000 UNIFORM BUSINESS REPORT (UBR)

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0813465

**DOCUMENT #** P99000028237

**1. Entity Name**  
K2S E-SERVICES, INC.

FILED

00 OCT 30 AM 9:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Principal Place of Business**      **Mailing Address**  
5105 WEST LONGFELLOW AVE.  
TAMPA, FL 33629



DO NOT WRITE IN THIS SPACE

**2. Principal Place of Business**      **3. Mailing Address**

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

**4. FEI Number** 65-0905716       **Applied For**  
Not Applicable

**5. Certificate of Status Desired**  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

TERRY STEGNER  
5105 WEST LONGFELLOW AVE.  
TAMPA, FL 33629

**7. Name and Address of New Registered Agent**

Name

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

City      **FL**      Zip Code

**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** \_\_\_\_\_

**9.** This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

**10.** Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST SALLY KIESS 5105 W. LONGFELLOW AVE. TAMPA, FL 33629	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	100003463661--2 -11/15/00--01018--007 ****150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

**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.

**SIGNATURE:** SALLY KIESS, PRES. *Sally Kiess 10-26-00*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/99)

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# CBS FINANCIAL, CPA, PA

CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

COMPREHENSIVE BUSINESS AND INDIVIDUAL FINANCIAL SOLUTIONS

October 24, 2000

Florida Department of State  
Division of Corporations  
Annual Reports Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: K2S Enterprises, Inc.  
Address change 3\13\00  
Document # P99000069472  
2000--Uniform Business Report

Re: K2S E-Services, Inc.  
Address change 3\13\00  
Document # P99000028237  
2000--Uniform Business Report

Dear Madam /Sir:

We have been retained by the above referenced taxpayer.

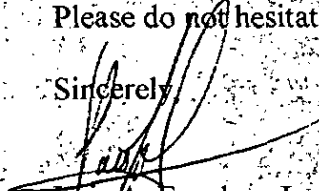
K2 S Enterprises, Inc. and K2S E-Services, Inc. did not receive a notice to file the 2000 Uniform Business Report. The mailing address was changed and filed by your department, but she did not receive a first or second notice. It appears that there has been some confusion on your end.

Ms. Kiess's job requires that she work out of state most of the year and she returns home for an occasional weekend; however, a member of her family is there every day. This would not be the first time that mail sent to her address was not delivered. We sent out *certified mail* to her and that was returned as "addressee unknown". Needless to say, she was surprised and dismayed by your notice that the corporations had been dissolved.

Ms. Kiess wants her corporations to remain active and is sending a properly completed 2000 Uniform Business Report for each corporation and a check in the amount of \$150.00, one for each corporation, payable to the Florida Department of State.

Please do not hesitate to contact our offices if you have any questions.

Sincerely,

  
Luis A. Escobar, Jr., CPA  
Encl.: Uniform Business Reports

W. COMMERCIAL BLVD.  
# 7  
LAUDERDALE

(954) 724-4141  
(954) 724-4171  
(877) 227-9797

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