2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A32164 1. Entity Name					FILED
KAYANN INVESTMENTS, LTD.				02 JAN -9 PM 4: 35	
Principal Place of Business 6915 MAIN ST. #432 MIAMI LAKES FL 33014-6577		Mailing Address 6915 MAIN ST. #432 MIAMI LAKES FL 33014-6577			SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business 3. Mailing Addres			SS		
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			DUE BY MAY 1, 2002
City & State		City & State			4. FEI Number 65-0292935 Applied For Not Applicable
Zip Country		Zip Country		ntry	5. Certificate of Status Desired
6. Name and Address of Current Registered Agent			- /. <u>-</u>		7. Name and Address of New Registered Agent
M & W AGENTS, INC.				Name	
BOCA CORPORATE CENTER, STE. 107				Street Address (P.O. Box Number is Not Acceptable)	
	RPORATE BLVD.				
BOCA RATON FL 33431				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: Signature, typed or printed name of registered agent and title if applicable. DATE 9. Capital Contributions as Shown on record. \$120,000.00 10. Amount of Capital Contributions in FLORIDA to date.					
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION 13.					ADDRESS CHANGES ONLY
DOCUMENT # NAME	\$89111 KELA, INC.		STRE	ET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	6915 MAIN ST. #432 MIAMI LAKES FL 33014		CITY	-ST-ZIP	
DOCUMENT # NAME			STRE	ET ADDRESS	9000047758694
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP	****526.25 *****526.25
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STREET ADDRESS CITY-ST-ZIP			CITY-	-ST-ZIP	
DOCUMENT /			STREI	ET ADDRESS	
STREET ADDRESS CITY-ST-ZIP			· I	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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					

1/8/02 305-558-3343