SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9. 1995 AMOUNT DUE ON OR REFORE \$/\$/NG: \$225 (IF DISSOLVED, MINHOUM AMOUNT DUE TO REINSTATE: \$375) PROFIT FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE DIVISION OF CORPORATIONS CORPORATION Sandra B. Monham ANNUAL REPORT Socretary of State 1995 DIVISION OF CORPORATIONS 95 NUG-9 PM 12: 23 **DOCUMENT #** (9) K & N CONSTRUCTION, INC. Principal Place of Business Mailing Address 7170 SW 13 TERRACE 7170 SW 13 TERRACE MIAMI FL 33144-5413 MIAMI FL 33144-5413 DO NOT WRITE IN THIS SPACE. 3. Date incorporated or Qualified | 3n, Date of Last Report 04/02/1981 10/24/1944 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 65-0090216 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 City & State 6. Election Campaign Financing City & State \$5.00 May Bo 28 Trust Fund Contribution Added to Fees 23 Country Zin Country g. This corporation has liability for intangible tax under a 199 03? Yes Ŭ No 30 29 Florida Statutos 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 KAEGI, FRANK 82 Street Address (P.O. Box Number is Not Acceptable) 1240 NW 4TH STREET 83 MIAMI FL 33125 84 City Zip Code 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. SIGNATURE PARADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12
833 CHANNING ROLL Change Ad (NOTE: Registered Agent signature required when reinstating) Signature, typod or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS 12. 13. TITLE 1, 1 TITLE KAEGI, FRANK 1.2 NAME NAME LAKELAND FL 33805 1240 NW 4TH STREET 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33125 1.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change 2.1 TIFLE TITLE NAPOLES, LYDIA M. NAME 2.2 NAME 7170 SW 13TH TERR STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33144-5413 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE 3.1 TITLE NAPOLES, THOMAS NAME 32 NAME 7170 SW 13TH TERR. STREET ADDRESS 3.3. STREET ADDRESS MIAMI FL 33144-5413 3.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change TITLE 4.1 TITLE NAME 4.2 HAJAF STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY+ST+ZIP CITY-ST-ZIP 5.1 TITLE Change Addition TITLE 5.2 NAME HAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP Change Addition TITLE 6.1 TITLE 82 NAME NAME **0.3 STREET ADDRESS** STREET ADDRESS CHY-ST-7P 64 CHY-\$1-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 eath; 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. GRUEN WASHED HAND OF SIGNING OFFICER ON DIRECTOR WAS WAS LIAM STATE (305)

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