

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 15 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **F24427** (9)

1. Corporation Name  
**K & N CONSTRUCTION, INC.**

Principal Place of Business  
**7170 SW 13 TERRACE  
MIAMI FL 33144-5413**

Mailing Address  
**7170 SW 13 TERRACE  
MIAMI FL 33144-5413**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>04/02/1981</b>	3a. Date of Last Report <b>05/01/1996</b>
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>65-0090216</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>KAEGI, FRANK 1240 NW 4TH STREET MIAMI FL 33125</b>		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	<b>FL</b> 85 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>T</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>KAEGI, FRANK</b>	1.2 NAME	<b>TOMAS NAPOLES</b>
STREET ADDRESS	<b>833 CHANNING RD</b>	1.3 STREET ADDRESS	<b>7170 SW 13TH TERR</b>
CITY-ST-ZIP	<b>LAKELAND FL</b>	1.4 CITY-ST-ZIP	<b>MIAMI FL 33144</b>
TITLE	<b>T</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	
NAME	<b>NAPOLES, LYDIA M.</b>	2.2 NAME	
STREET ADDRESS	<b>7170 SW 13TH TERR</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL 33144-5413</b>	2.4 CITY-ST-ZIP	
TITLE	<b>S</b> <input type="checkbox"/> DELETE	3.1 TITLE	
NAME	<b>NAPOLES, THOMAS</b>	3.2 NAME	
STREET ADDRESS	<b>7170 SW 13TH TERR.</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL 33144-5413</b>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE:

**Tomas Napoles** **TOMAS NAPOLES** 4/25/97 305-2614842

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0200088

CR2E034 (9/96)