

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90062 030 ***150.00

DOCUMENT # F75023

1. Entity Name
KENDALL GRAPHICS, INC.

636621



DO NOT WRITE IN THIS SPACE

Principal Place of Business 13500 N KENDALL DR SUITE 185 MIAMI FL 33186-1528 US	Mailing Address 13500 N KENDALL DR SUITE 185 MIAMI FL 33186-1528 US
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Principal Place of Business 1598 NE 1 Ave. Suite, Apt. #, etc.	3. Mailing Address 1165 S.W. 133 CT Suite, Apt. #, etc.
City & State Miami FL	City & State Miami FL
Zip 33132 Country	Zip 33186 Country

4. FEI Number 59-2183504	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HERZOG, FORTUNA
11165 S.W. 133 CT.
MIAMI FL 33186

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State FL
Zip Code

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

ii. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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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: Paul L. Herzog **4/10/00** **(305) 373-1919**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)