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

PROFIT CORPORATION ANNUAL REPORT

1999

a Principal Place of Rusiness



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90212 024 ***150.00

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Applied For

DOCUMENT # P97 1. Corporation Name KUALOS PROPERTIES, INC.		
Principal Place of Business	Mailing Address	
4730 NW 102 AVE APT 208 MIAMI FL 33178	4730 NW 102 AVE APT 208 MIAMI FL 33178	DO NOT WRITE IN THIS SPA
		3, Date Incorporated or Qualifed

25 Mailing Address

21	Timopai Fidos of Submoso	26				6	5-0808761			Not	Applicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.				ertificate of Status Desired	- !		75 Acee Req	dditional uired
23	City & State	28	City & State				ection Campaign Financing ust Fund Contribution			.00 N	fay Be
	Zip Country	29	Zip Cou	ntry			his corporation owes the current year Intersonal Property Tax.		ible Ye:		□No
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
	DINER, MANUEL 141 NE 3 AVE STE 601	-		81 82	Name Street Address	s (P.O	. Box Number is Not Acceptable)				
ļ	MIAMI FL 33132			83							
				84	City		FL	_	85	Zip C	ode

4. FEI Number

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						
TITLE	D	☐ DELETE	1.1 TITLE		Change	☐ Addition				
NAME	MARGULIS, PERLA		1.2 NAME							
STREET ADDRESS	4730 NW 102 AVE APT 208		1.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL 33178		1.4 CITY-ST-ZIP							
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition				
NAME	MARGULIS, ENRIQUE		2.2 NAME							
STREET ADDRESS	-4730 NW-102 AVE APT-208	<u></u>	2.3 STREET ADDRESS		<u> </u>					
CITY-ST-ZIP	MIAMI FL 33178		2. 4 CITY-ST-ZIP							
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change	Addition				
NAME	MARGULIS, ISAAC		3.2 NAME							
STREET ADDRESS	4730 NW 102 AVE APT 208		3.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL 33178		3.4. CITY-ST-ZIP							
TITLE		□ DELETE	4.1 TITLE		Change	☐ Addition				
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET ADDRESS		•					
CITY-ST-ZIP			4.4 CITY-ST-ZIP							
TITLE	·	☐ DELETE	5.1 TITLE		Change	☐ Addition				
NAME · · ~	والإي الأستاد المستاد		5.2 NAME							
STREET ADDRESS		•	5.3 STREET ADDRESS							
CITY-ST-ZIP			5.4 CITY-ST-ZIP		<u> </u>					
ππLE		☐ DELETE	6.1 TITLE		Change	Addition				
NAME		•	6.2 NAME							
STREET ADDRESS			6.3 STREET ADDRESS	•						
CITY-ST-ZIP		7	6.4 CITY-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 annual report or supplements 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 regeiver 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 or pay a plachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)