

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 27 AM 10:31

DOCUMENT # **H02580** (9)

1. Corporation Name
KALOTI MUNIR TRADING ESTABLISHMENT, INC.

Principal Place of Business 1460 NW 82ND AVENUE MIAMI FL 33126	Mailing Address 1460 NW 82ND AVENUE MIAMI FL 33126
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/08/1984		3a. Date of Last Report 02/03/1994	
4. FCI Number 59-2407400		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
COSTANZO, SARINO R. 330 BISCAYNE BLVD., SUITE 500 MIAMI FL 33132				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City	FL	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 types in printed name of registered agent and the corporation) (Printed Name of Agent Signature required when terminating) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE VPS	NAME KALOUTI, AWNI K	11 TITLE President	☒ Change ☐ Addition
STREET ADDRESS 9120 E. CALUSA CLUB DRIVE		12 NAME Kaloti, Awni K.	
CITY, ST, ZIP MIAMI FL		13 STREET ADDRESS 9120 E. CALUSA CLUB DRIVE	
TITLE P	NAME KALOUTI, MUNIR R.	14 CITY, ST, ZIP MIAMI, FL 33186	
STREET ADDRESS 10826 SW 148TH AVE. DR.		21 TITLE Chairman	☒ Change ☐ Addition
CITY, ST, ZIP MIAMI FL		22 NAME Kaloti, Munir R.	
TITLE		23 STREET ADDRESS 1460 NW 82 AVENUE	
NAME		24 CITY, ST, ZIP MIAMI, FL 33186	
STREET ADDRESS		31 TITLE	☐ Change ☐ Addition
CITY, ST, ZIP		32 NAME	
TITLE		33 STREET ADDRESS	
NAME		34 CITY, ST, ZIP	
STREET ADDRESS		41 TITLE	☐ Change ☐ Addition
CITY, ST, ZIP		42 NAME	
TITLE		43 STREET ADDRESS	
NAME		44 CITY, ST, ZIP	
STREET ADDRESS		51 TITLE	☐ Change ☐ Addition
CITY, ST, ZIP		52 NAME	
TITLE		53 STREET ADDRESS	
NAME		54 CITY, ST, ZIP	
STREET ADDRESS		61 TITLE	☐ Change ☐ Addition
CITY, ST, ZIP		62 NAME	
TITLE		63 STREET ADDRESS	
NAME		64 CITY, ST, 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 149.07(3)(b), 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, on an attachment with an address.

SIGNATURE:  **Awni Kaloti** **3-31-95** **(305) 477-4700**
(Signature and typed on printed name of signing officer or director) Date Telephone Number