FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K40603** **(8)**

1. Corporation Name

KRESS INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
122 N.E. 1ST ST., #110 MIAMI FL 33132-2541	122 N.E. 1ST ST., #110 MIAMI FL 33132-2541

3. Date Incorporated or Qualified: **10/24/1988**

3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business
21

Suite, Ap.. #, etc.
22

City & State
23

Zip
24

Country
25

2a. Mailing Address
26

Suite, Apt. #, etc.
27

City & State
28

Zip
29

Country
30

4. FEI Number: **65-0086077** ☐ 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

MAREHN, EVAN R.
48 E. FLAGLER ST., STE. 374
MIAMI FL 33131

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BEREZDIVIN, MOISES		1.2 NAME	
STREET ADDRESS	CEREZO #2, SAN PATRICIO		1.3 STREET ADDRESS	
CITY-ST-ZIP	SAN JUAN PR		1.4 CITY-ST-ZIP	
TITLE	VPD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	ROK, SERGIO		2.2 NAME	
STREET ADDRESS	48 E FLAGLER ST PH105		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	
TITLE	TD	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	JOSEPH, CLAUDE		3.2 NAME	
STREET ADDRESS	10390 S.W. 63RD CT.		3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		3.4 CITY-ST-ZIP	
TITLE	SD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	BEREZDIVIN, MARK		4.2 NAME	
STREET ADDRESS	CEUD. TENERIFE, #702		4.3 STREET ADDRESS	
CITY-ST-ZIP	SANTUCE PR		4.4 CITY-ST-ZIP	
TITLE	VPD	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	LAZOTT, BERNARDO		5.2 NAME	
STREET ADDRESS	COND. TENEVIFE #802		5.3 STREET ADDRESS	
CITY-ST-ZIP	SANTUCE PR		5.4 CITY-ST-ZIP	
TITLE	VPD	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	TUCHMAN, MEDARDO		6.2 NAME	
STREET ADDRESS	CALLE A-D-2		6.3 STREET ADDRESS	
CITY-ST-ZIP	GUAYNABO PR		6.4 CITY-ST-ZIP	

CR2E034 (12/95)

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 119.07(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 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 added in an attachment with an address.

SIGNATURE: Claude Joseph 4/16/96 3053589249
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #