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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT 1996	# .7	ary of State CORPORATIONS		
OCUMENT # M87062 (9)				
K & R GROUP III, INC.				
ncipal Place of Business	Mailing Address			
00 CLINT MOORE ROAD	1000 CLINT MOORE RO	DAD		
UITE 110 OCA RATON FL 33487	SUITE 110 BOCA RATON FL 33487		Date Incorporated or Qualified	3a. Date of Last Report
000 1311 011 7 2 3 3 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			06/27/1988	05/01/1995
Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
	26		65-0061824	Not Applicable \$8.75 Additional
Suite, Apt #, etc.	Suite Apt. #, etc		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
City a drate	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for Flooda Statutes	intangible tax under s. 199 032. s. 🔲 No
25 9. Name and Address of Curre	nt Registered Agent	30	10. Name and Address of New I	
9. Name and Address of Corre	in negistered Agent	81 Name		
ENDELSON, KENNETH M.		82 Street Add	dress (P.O. Box Number is Not Acceptal	ble)
SUITE 110				
1000 CLINT MOORE ROAD		83		
BOCA RATON FL 33487		84 City		FL 85 Zip Code*
GNATURE Signature typic or professionaria of registered age. OF FICERS All	ctand trestantischer di NO DIRECTORS	ESTE Registeria Agent signature resp.	except on stang ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12
LE DPT	[] DELFTE	1 1 TITLE	,	Change Addition
ME ENDELSON, KENNETH M.		1.2 NAME		
REEF ADDRESS 1000 CLINT MOORE RD.		1.3 STHEEL ADDRESS		
TY-S1-ZIP BOCA RATON FL TLE DVS	DELETE	2 1 TITLE		Change Addition
ME FINKELSTEIN, RICHARD		2.2 NAMŁ		
REET ADDRESS 1000 CLINT MOORE RD.		2.3 STREET ADORESS		
TY-ST-ZIP BOCA RATON FL		24C1Y ST-ZIP		Change Addition
TLE	☐ DELETE	3 1 HTLE 3 2 NAME		<u>.</u> , <u> </u>
AME		3.3 STREET ADORESS		
REET ADDRESS TY - ST - ZIP		3.4 CiTr - S1 Zif		
TLE	☐ DELETE	4 1 TITLE		Change Addit or
AME		4.2 NAME		
TREET ADDRESS		4.3 STREET ADDRESS		
TY-ST-ZIP	DELETE	5 1 Tr'LE		Change Addition
AME		5.2 NAME		
TREET ADDRESS		5.3 STREET ADDRESS		
ITY - ST - ZIP		5.4 CHY+ST 7IP		Change
ITLE	☐ DELETE	6 1 TITLE 62 NAME	1000018 -06/03/9601	48151" " "
AME		6.3 STREFT ADDRESS	-06/03/9601 ***208,75	1055==012
STREET ADDRESS		67 CHY \$1, 210		
 I do hereby certify that the information supplies certify that the information indicated on this are 	ed with this filing is voluntarily f	urnished and does not qual	fy for the exemption stated in Section 1 purate and that my signature shall have t	19.07(3)(k), Florida Statutes. I further he same legal effect as if made unde
certify that the information indicated on this are	anagi report or suppliemental a appration or the receiver or tru	stee 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, o	or on an attachment with an a	uciress.	M ENDERSON 4/30/4	
			- AA /	