PROFIT CORPORATION ANNUAL REPORT 1996			raB Mo etary of	P a n			
OCUMENT # Corporation Name KUMJIAN'S, INC.	241231	(0)			MANA NAN 01241 MANA MANA	lice: Nei: Bible bib	((\$16) 918
Place of Business 12 SEXTON COVE RD. P.O.BOX 851 (EY LARGO FL 33037	N	failing Address 42 SEXTON COVE F P.O.BOX 851 KEY LARGO FL 330					
incipal Piace of Business	20	Matter Add			3. Date Incorporated or Qualified 10/15/1960	3a. Date o	2/08/1995
ite, Apt. #, etc.	26	Mailing Address			4. FEI Number 59-0914402		Applied For Not Applicat
y & State	27	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
	28	City & State	, <u>_</u> _		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
25	untry 29	Zip	30 C	intry	8. This corporation has liability for Florida Statutes Yes		
	dress of Current Regist	tered Agent		81 Name	10. Name and Address of New F		pent
KUMJIAN, DWANA DAVI 42 SEXTON COVE RD.	S			1	ess (P.O. Box Number is Not Acceptab	nie)	<u> </u>
TE SEATON CUYE RD.				Oli Oct 1 1001			
KEY LARGO FL 33037			į	B3			
KEY LARGO FL 33037	actions 607.0502 and 607 the State of Florida. Such ligations of, Section 607.0	.1508, Florida Statutes change was authorize 505, Florida Statutes	s, the at	83 84 City		FI	85 Zip Code ging its registered off
registered agent, or both, in this arm the provisions of Se registered agent, or both, in this arm the and accept the oblique. Signature, based or printers na	OFFICERS AND DIRECT	SOO, FIORIDA STATUTOS.	S, the at d by the t. Register	84 City bye-named corpor corporation's boar Agent signature requires	ation submits this statement for the pur d of directors. I hereby accept the appu	FL rpose of change ointment as re-	ging its registered off gistered agent, I am
KEY LARGO FL 33037 resuant to the provisions of Se registered agent, or both, in the provision of the provi	OFFICERS AND DIRECT /ANA DAVIS OVE RD.	OOS, FIORIDA STATUTES. (NOTE	13 1.1 1.2 1.3	84 City Divernamed corpor corporation's boar Agent signature require ITLE TILE TILE THE REET ADDRESS	ation submits this statement for the pur d of directors. I hereby accept the appoint twhen renstaing)	FL rpose of change ointment as re-	ging its registered off gistered agent, I am
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