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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 04 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

SIGNATURE:

DOCUMENT # 389213

(0)

KAYE E	BROS., INC.				
Principal Place of Business 590 N.E. 185TH ST. WIAMI FL 33179		Mailing Address 590 N.E. 185TH ST. MIAMI FL 33179-4513		T LOUISE SILEN SURT SURTO HERD, PLUBO TYCH BIOCH	! DIBA BIBN KIBN BIBA BIBA ISBI
				3. Date Incorporated or Qualified 3. 09/30/1971	a. Date of Last Report 01/31/1996
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	4 -1-	26		59-1359951	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Sta	te	City & State		6. Stanting Convenient Stanting	
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intan	
24	25]	29	30	Florida Statutes	
	Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registe	ared Agent
	UTCHIK,ALAN		81 Name		
	I11 BISCAYNE BLVD MIAMI FL 33161		82 Street	Address (P.O. Box Number is Not Acceptable)	
			83		
			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508 Florida Statute	s the shove-named	corporation submits this statement for the nurse	FL
	registered agent, or both, in the Stat am familiar with, and accept the obti	e of Florida. Such change was at gations of, Section 607 0505, Flor	uthorized by the corp rida Statutes.	corporation submits this statement for the purpoporation's board of directors. I hereby accept the	⇒ appointment as registered
SIGNATURE	Signature typing or printed cache of registered a	gent and little if applicable (NOTE:	Registered Agent signature	required when reinstating) D.	ATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TILLE	PD	DELETE	1.1 TITLE	V	Change Addition
NAME	KRUTCHIK,ALAN		1.2 NAME	ROBERT J. ROTH	
STREET ADDRESS	11111 BISCAYNE BLVD	1	1.3 STREET ADDRESS	1470 NW 122 AVE	
CHTY - ST - ZIF	N MIAMI FL		1.4 CITY-ST-ZIP	PEMBROKE LAKES FL	33026
THE		L DELETE	2.1 TITLE	S	Change Addition
NAME		•	2.2 NAME	MADALINE LAWRENCE 20410 N.E. 10 TH COURT	
STREET ADDRESS			2 3 STREET ADDRESS	1	
CHTY-ST-7IF	}	Drift	2. 4 CITY - ST - ZIP	No. MiAMI BEALL, FL 3317	
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STHEET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-7IP TITLE		DELETE	34. CITY-ST-ZIP 41 TITLE		Change Addition
NAME		DELETE	4 2 NAME		Change Caronnon
STREET ADDRESS			43 STREET ADDRESS		
CITY-S1-7P			4.4 CITY-ST-ZIP		
10LF		☐ DELETE	51 TITLE		Change Addition
NAME			52 NAME		V
STREET ADDRESS			5.3 STREET ADDRESS		
CITY: ST-ZIF			5.4 City-St-zip		
THLE		DELETE	61 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
	I				

14. I do 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 suppliemental 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 an attachment with an address.

ALAN KRUTCHIK Pars 1/6/97

301-613-2880 Daytime Prone #