

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

FILED

Jan 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 421730 (3)
1. Corporation Name
KIMRE, INC..

Principal Place of Business
13501 SW 128 ST
111
MIAMI FL 33186
US

Mailing Address
PO BOX 571240
MIAMI FL 33257-1240
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/22/1973	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1513528	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

PEDERSEN, GEORGE C.
13501 SW 128 ST #111
MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0507 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 *George C. Pedersen* George C. Pedersen, President 1/8/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PTD	<input type="checkbox"/> DELETE		1.1 TITLE	PTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PEDERSEN, GEORGE			1.2 NAME	PEDERSEN, GEORGE		
STREET ADDRESS	13501 SW 128 ST., STE 111			1.3 STREET ADDRESS	13501 SW 128 ST., STE 111		
CITY-ST-ZIP	MIAMI FL			1.4 CITY-ST-ZIP	MIAMI, FL 33186		
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHECHTER, JAMES R			2.2 NAME	SCHECHTER, JAMES R		
STREET ADDRESS	1350 NW 74 ST			2.3 STREET ADDRESS	1350 NW 74 ST		
CITY-ST-ZIP	MIAMI FL			2.4 CITY-ST-ZIP	MIAMI, FL 33147		
TITLE	S	<input type="checkbox"/> DELETE		3.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WYATT, JOHANNA			3.2 NAME	WYATT, JOHANNA		
STREET ADDRESS	RT 1 BOX 31			3.3 STREET ADDRESS	RT 1 BOX 31		
CITY-ST-ZIP	INTERLACHEN FL			3.4 CITY-ST-ZIP	INTERLACHEN, FL 32148		
TITLE	VPD	<input type="checkbox"/> DELETE		4.1 TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PEDERSEN, MARRIETTA			4.2 NAME	PEDERSEN, MARRIETTA		
STREET ADDRESS	105 FAIRSIDE, UNIT B			4.3 STREET ADDRESS	105 FAIRSIDE, UNIT B		
CITY-ST-ZIP	LYNDEN WA			4.4 CITY-ST-ZIP	LYNDEN, WA 98264		
TITLE	D	<input type="checkbox"/> DELETE		5.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ORR, MARTINE			5.2 NAME	ORR, MARTINE		
STREET ADDRESS	1010 S ORAIBI CT			5.3 STREET ADDRESS	1010 S. ORAIBI CT		
CITY-ST-ZIP	PUEBLO WEST CO			5.4 CITY-ST-ZIP	PUEBLO WEST CO 81007		
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DESSLER, GARY			6.2 NAME	DESSLER, GARY		
STREET ADDRESS	13554 SW 58 AVE			6.3 STREET ADDRESS	13554 SW 58 AVE		
CITY-ST-ZIP	MIAMI FL			6.4 CITY-ST-ZIP	MIAMI, FL 33156		

14. I 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 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 on an attachment with an address.

SIGNATURE: *George C. Pedersen*

APR 8, 1998 3052334249

CR2E034 (10/97)