

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

FILED
Feb 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **425132** (8)
1. Corporation Name
K DATA PRODUCTS, INC.

Principal Place of Business	Mailing Address
1401 N.W. 84TH AVENUE MIAMI FL 33126 US	1401 N.W. 84TH AVENUE MIAMI FL 33126 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/04/1973	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-1459786		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Zip	28 Country	29 Zip		30 Country	
24	25	29		30	

9. Name and Address of Current Registered Agent

**KINGSBERG, DAVID M.
3802 N.W. 207TH ST. #704
MIAMI FL 33180**

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 607.0502 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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
VD	KINGSBERG, DAVID M.	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
3802 N.W. 207TH ST. #704	AVENTURA FL	2.1 TITLE	2.2 NAME
CED	KINGSBERG, BARBARA K.	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
3802 N.E. 207TH ST. #704	AVENTURA FL	3.1 TITLE	3.2 NAME
PD	KINGSBERG, EDWARD N	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
14305 SW 102ND CT	MIAMI FL	4.1 TITLE	4.2 NAME
VP	KINGSBERG, CARY B.	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
10113 N.W. 13TH COURT	PLANTATION FL	5.1 TITLE	5.2 NAME
		5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
		6.1 TITLE	6.2 NAME
		6.3 STREET ADDRESS	6.4 CITY - ST - ZIP

14. I hereby certify that the information submitted 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; that 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:

Edward N. Kingsberg

1-28-98

CP2E034 (10/97)