


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

FILED

Jan 30 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 # 474418 (1)					
1. Corporation Name KW SHOPS, INC.					
Principal Place of Business 1101 MONROE STREET P.O. BOX 1030 TOLEDO OH 43697-1030			Mailing Address 1101 MONROE STREET P.O. BOX 1030 TOLEDO OH 43697-1030		



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/22/1975	
21		26		4. FEI Number 34-1165533	Applied For Not Applicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	City & State	28	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Zip	25	Country	29	Zip
30	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 HELD, EDWIN W JR FISCHETTE, OWEN & HELD SUITE 1916, GULF LIFE TOWER JACKSONVILLE FL 32207				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	ST	1.1 TITLE	
NAME	KATZ, ARTHUR	1.2 NAME	
STREET ADDRESS	1101 MONROE ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	TOLDEO, OHIO 00000	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	
NAME	KATZ, ARTHUR	2.2 NAME	
STREET ADDRESS	1101 MONROE ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	TOLDEO, OHIO 00000	2.4 CITY - ST - ZIP	
TITLE	PD	3.1 TITLE	
NAME	KATZ, CALVIN	3.2 NAME	
STREET ADDRESS	1101 MONROE ST	3.3 STREET ADDRESS	
CITY - ST - ZIP	TOLDEO, OHIO 00000	3.4 CITY - ST - ZIP	
TITLE	AS	4.1 TITLE	
NAME	SHEPHARD, KATHY	4.2 NAME	
STREET ADDRESS	1101 MONROE ST	4.3 STREET ADDRESS	
CITY - ST - ZIP	TOLDEO, OHIO 00000	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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:

Kathy Shephard

Asst Sec

1-10-98

419-243-7281

CR2E034 (10/97)