

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

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**May 04 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 # 509256 (4)

1. Corporation Name
THE KANE GROUP, INC.



Principal Place of Business: 7441 114TH AVE N #804 LARGO FL 34643 US

Mailing Address: 7441 114TH AVE N #804 LARGO FL 34643 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-28) fields.

3. Date Incorporated or Qualified: 07/07/1976

4. FEI Number: 59-1696930

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent: PRATESI, EMIL G RICHARDS, GILKEY, FITE, SALUGHTER, PRATESI 1253 PARK STREET CLEARWATER FL 34616

10. Name and Address of New Registered Agent (81-85) fields.

11. Pursuant to the provisions of Sections 607.0503 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: *Sheldon Kane* DATE: 4/17/98

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|------------------------|---|---|
| TITLE | PD | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | KANE, SHELDON I. | 1.2 NAME | |
| STREET ADDRESS | 7441 114TH AVE N, #604 | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | LARGO FL | 1.4 CITY-ST-ZIP | |
| TITLE | VT | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | KANE, JERRALD | 2.2 NAME | |
| STREET ADDRESS | 7441 114TH AVE N #604 | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | LARGO FL | 2.4 CITY-ST-ZIP | |
| TITLE | VS | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | KANE, KAREN | 3.2 NAME | |
| STREET ADDRESS | 7441 114TH AVE N #601 | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | LARGO FL | 3.4 CITY-ST-ZIP | |
| TITLE | V | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | KANE, RANDY | 4.2 NAME | |
| STREET ADDRESS | 7441 N 114 AVE #604 | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | LARGO FL | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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: *Sheldon Kane* ; *JERRALD P. KANE* 4/17/98

CR2E034 (10/97)