

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 24, 1999 8:00 am
Secretary of State

05-24-1999 90015 033 ***158.75

DOCUMENT # 525592

1. Corporation Name

KILBURG ASSOCIATES, INC.



Principal Place of Business

MIAMI MERCHANDISE MART
777 NW 72 AVE.. 10050
MIAMI FL 33126
US

Mailing Address

MIAMI MERCHANDISE MART
777 NW 72 AVE.. 10050
MIAMI FL 33126
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/10/1977

2. Principal Place of Business

21 2800 KIRK STREET

Suite, Apt. #, etc.

22

City & State

23 MIAMI, FLORIDA

Zip

24 33133

25

USA

2a. Mailing Address

26 2800 KIRK STREET

Suite, Apt. #, etc.

27

City & State

28 MIAMI, FLORIDA

Zip

29 33133

30

USA

4. FEI Number

59-1734900

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

INMAN, R. J. JR.
2252 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

FL

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

TITLE PD
NAME KILBURG, GEORGE J.
STREET ADDRESS MIAMI-MERCHANDISE MART
CITY-ST-ZIP MIAMI FL

TITLE ST
NAME KILBURG, GEORGE J.
STREET ADDRESS MIAMI-MERCHANDISE MART
CITY-ST-ZIP MIAMI FL

TITLE V
NAME DYKES, ROBERT R.
STREET ADDRESS 777 N.W. 72ND AVE. 10050-
CITY-ST-ZIP MIAMI FL

TITLE V
NAME KILBURG, MAGDALINE
STREET ADDRESS 282 SHELTON TERRACE
CITY-ST-ZIP HILLSIDE NJ

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Address ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 2800 KIRK ST
1.4 CITY-ST-ZIP MIAMI FL 33133

2.1 TITLE Address ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 2800 KIRK ST MIAMI FL 33133
2.4 CITY-ST-ZIP

3.1 TITLE Address ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 2800 KIRK ST
3.4 CITY-ST-ZIP MIAMI FL 33133

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/99 305-439-3130
Date Daytime Phone #

CR2E034 (1/98)

0180535