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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 560455 (8) KANGA EXPORTING, INC.												
Principal Place of Business 2080 WEST HWY \$20 COCOA FL \$2928 US		Mailing Address P.O. BOX 3844 N/A COCOA FL 32924-3844 US										
									Pate Incorporated or Qualifie 2/23/1978	d 3a. D	ale of Last Ro 01/1996	aport .
ı	lace of Business		Mailing Address	****	····			4. F	Et Number 59-1800737		Ap	plied For
Suite: Apt	#. etc.	26	Suite, Apt. #, etc.								\$8.75	t Applicable
22		27						5 . C	Certificate of Status Desired		Fee Re	
City & Stat	te		City & State						lection Campaign Financing		\$5.00	
23 Zip	Country	28	Zip	T7	Country				rust Fund Contribution		Added t	
24	25	29	e.ip	30	Southing		• :		his corporation has liability ! lorida Statutes		ntax under s. □ No	199.032,
	9. Name and Address of Curre		tered Agent	1771.		.,			lame and Address of New		Agent	
	ROON, RICHARD				81	Name						
	S N FRIDAY CIRCLE				82	Street	Addres	ss (P.C	D. Box Number is Not Accep	table)		
COO	OA FL 32926				83	<u> </u>						
	•						<u> </u>			· · · · · · · · · · · · · · · · · · ·		
					84	City	2			FL	85 Zip (Code
office or agent. La SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the Statarn familiar with, and accept the oblig significant transfer points have of registered as	e of Flori galions o	da. Such change was f, Section 607.0505, Fl	author orida	rized by Statutes	the cor	potátio	n's bo	ard of directors. I hereby ac	cept the app	ocintment as	registered registered
12.	OFFICERS AN	ND DIREC			13.			AD	DDITIONS/CHANGES TO OF	FICERS AN		
TRUE .	DP GORDON, RICHARD		☐ DELETE		.1 TITLE				the second second		L Change	☐ Addition
NAME STREET ADDRESS	4838 N FRIDAY CIRCLE				.2 NAME	ADDRESS						
CITA-\$1-51	COCOA, FL 00000				I.4 CITY-S							
MUE	ST		DELETE		2.1 TITLE	PI - TH	 				Change	Addition
NAME	GORDON, ELVA R			2	2 NAME			1				
STREET ADORESS	4636 N FRIDAY CIRCLE			2	3 STREET	ADDRESS			. 4			:
CITY - ST - ZIP	COCOA, FL 00000		L DCI FYE		4 CITY-	ST-ZIP	-			·		1.420
1.00			☐ DELETE		1.1 TITLE				•.		L Change	Addition
NAME STREET ADDRESS).2 NAME La street	ADDRESS						
CITY ST-ZIF					3.4 CITY-5							
TITLE			DELETE		I.1 TITLE						Change	Addition
NAME				- 1	. 2 NAME							
STREET ADDRESS				- 1	1.3 STREET	ADDRESS						
CHY-SI ZIF			Louise		4.4 CITY - S	31 - ZIP					1 65	1.1000
I IIII (DELETE		5.1 TITLE		1				Change	Addition
NAME STREET ADBRESS					5.2 NAME	ADDRESS			•			
CHY-ST-7IP					5.4 CITY - S							
THE			DELETE		5.4 TITLE	, , - 4.H	†				Change	Addition
NAME			•	- 1	5 2 NAME						-	
STREET ADORESS				- 1		ADDRESS	1					

64 CITY-ST-ZIP

14. If do 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

SIGNATURE:

SIGNATURE AND TYPED OR PAINTED NAME OF SIGNING MACER OR DIRECTOR

5/13/97

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FILED

May 23 1997 8:00am

Secretary of State

E034 (9/96)