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 # 576909

(6)

KF INTERNATIONAL, INC.

FILED Jun 13 1997 8:00am Secretary of State

Principal Place of Business		Mailing Add	Iross			† IDANON ONNIN HOUSE BIRNE TOPRE CONTO LANCE BIRNE BIRNE BIRNE GIRNE BIRNE BIRNE		
3100 N. 29TH COURT HOLLYWOOD FL 33020		P.O. BOX 993 HOLLYWOOD FL 33022						
						3. Date Incorporated or Qualified 06/26/1978	3a. Date of Last 12/05/1996	Report
2. Principal Place of	Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-1849399		lot Applicable
Suite, Apt. #, etc.		<u>├</u> ┐ ′	ot. #, etc.			5. Certificate of Status Desired	1 1 '	Additional
22		27						Deriupef
City & State		City & St	ate			6. Election Campaign Financing		May Be
Zip	Country	28 Zip		Country	·	Trust Fund Contribution		to Fees
24	25	29	3		(8. This corporation has liability for in Florida Statutes	Yes No	s. 199,032,
9	Name and Address of Curr		ant [3	· · · · · · · · · · · · · · · · · · ·		10. Name and Address of New Reg		
FRANK, RO				81	Name	10. 11	iotorea Agoin	
	NEDY CAUSEWAY							
				82	Street Add	dress (P.O. Box Number is Not Acceptable	e)	
MAMIFL 3)J 144			83	 			
				"				
	1			84	City		85 Zip	Code
44 Durayant to the	proviolence of Continue COZ Of	.0034500.6	n	No. of the			FL "	
office or register	ed agent, or both, in the Sta	te of Florida. Such c	riorida Statutes chango was aut	, tne apov Ihorized b	e-named cor v the corpora	poration submits this statement for the pu ation's board of directors. I hereby accep	urpose of changing t the appointment a	ils registered s registered
agent. I am fami	iliar with, and accept the obli	gations of, Section	607.0505, Florid	da Statule	s.	,		
SIGNATURE								
	e, typed or printed name of registered a	ND DIRECTORS	(NOTE F		orit s gnature requ	ured when reinstating)	DATE	
12.	OFFICENS A		DELETE	13.	·····	ADDITIONS/CHANGES TO OFFICE	EHS AND DIRECTO	RS IN 12 Addition
	EIER, FRED		_ becent				∟ Citange	L AUGILION
	N. 29TH COURT			1.2 NAME				
	YWOOD FL			1.3 STREET				
CITY-ST-ZIP HOU	THOOD FL		DELETE	1.4 CiTY - 5	ST-ZIP		Chann	1 delica
NAME		L) DECENE	2.1 TITLE			Change	Addition
				2.2 NAME				
STREET ADDRESS				2.3 STREET				
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TITLE NAME		<u>L</u>	□ prerit	3.1 TITLE			☐ Change	Addition
ľ				3.2 NAME	ADDRESS		- 4	
STREET ADDRESS				3.3 STREET	1			
CITY-ST-ZIP TITLE			DELETE	3.4. CITY-1 4.1 TITLE	S1-ZIP		Change	Addition
NAME		L.,	- DELL'IL				unange	∟ Madibali
-				4 2 NAME				
STREET ADDRESS	÷			4.3 STREET				
CITY-ST-ZIP			DELETE	4 4 CiTY - S	ii - ZIP		[] Ob	T Addition
TITLE	•	Ŀ.	J DECEMB	51 TITLE	ľ		☐ Change	L_} Addition
NAME				5.2 NAME			:	
STREET ADDRESS .				5.3 STREET				
CITY-ST-ZIP		· · ·	Torvere	5.4 CITY - S	T-ZIP		· · · · · · · · · · · · · · · · · · ·	
TITLE		L.] DEFELE	6.1 TITLE			Change	☐ Addition
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREE1	ADDRESS			
CITY-ST-ZIP	7 4 3 4 3 4 3 4 3			6.4 CITY - S				
14 I do hereby certi	ity that the information suppli	ad with this filing do	soc oot avalify f	or the eve	motion plate.	d in Section 110 07(3\(ii) Florida Statutos	I durther earlify the	t the

1 to hereby certify that the information supplied with this fling does not quality 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 chapted, or on an intechment with an address.

DECOMPOSE DE

OLONIATURE V

1/27/97