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Feb 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 580548

(6)

1. Corporation Name
KU ENTERPRISES, INC.



Principal Place of Business

% KURTZ & CO.
441 NE 4TH AVE. STE 100
FT. LAUDERDALE FL 33301
US

Mailing Address

% KURTZ & CO.
441 NE 4TH AVE. STE 100
FT. LAUDERDALE FL 33301-3220
US

3. Date Incorporated or Qualified
07/28/1978

3a. Date of Last Report
04/26/1996

2. Principal Place of Business

21 c/o LONDON WITTE & Co. P.A.
Suite, Apt. #, etc 3101 N. FEDERAL HWY
SUITE 700

City & State

23 FT. LAUDERDALE, FL 33306

24 33306

Country

25 USA

2a. Mailing Address

26 c/o LONDON WITTE & Co. P.A.
Suite, Apt. #, etc 3101 N. FEDERAL HWY
SUITE 700

City & State

28 FT. LAUDERDALE, FL 33306

29 33306

Country

30 USA

4. FEI Number

59-1847588

Applied For
Not Applicable

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

KURTZ, MARTIN
441 NE 4TH AVE
STE 100
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name KURTZ, MARTIN
82 Street Address (P.O. Box Number is Not Acceptable)
3101 N. FEDERAL HWY, STE 700
83
84 City FT. LAUDERDALE FL 85 Zip Code 33306

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	PINSKY, EDITH ROSEN	DELETED
STREET ADDRESS	5202 W 121ST ST OVERLAND PK FL			
CITY - ST - ZIP				
TITLE	AT	NAME	KURTZ, MARTIN J.	DELETED
STREET ADDRESS	441 NE 4TH AVE FORT LAUDERDALE FL			
CITY - ST - ZIP				
TITLE	S	NAME	ROSEN, LEONARD	DELETED
STREET ADDRESS	8362 OAK VIEW CIRCLE LENEXA KS			
CITY - ST - ZIP				
TITLE		NAME		DELETED
STREET ADDRESS				
CITY - ST - ZIP				
TITLE		NAME		DELETED
STREET ADDRESS				
CITY - ST - ZIP				
TITLE		NAME		DELETED
STREET ADDRESS				
CITY - ST - ZIP				

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Change	Addition
2.2 NAME	AT KURTZ, MARTIN J.	
2.3 STREET ADDRESS	3101 N. FEDERAL HWY, SUITE 700	
2.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33306	
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
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 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 appointed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, by an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MARTIN J. KURTZ 2-1247 954-566-4400
ASSISTANT TREASURER

CR2E034 (9/96)