FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A97000000421

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 NOV -7 PM 1:55



| KFP HOLDINGS, LTD. | | | ************************************** | | | |
|--|--|--|---|--|--|--|
| Malling Address 1250 N.W. 124TH AVENUE PLANTATION FL 33323 | Principal Office Address 1250 N.W. 124TH AVENUE PLANTATION FL 33323 | | 3. Date Formed or Registered 02/14/1997 3a. Date of Last Report | 5a. Capital Contributions as Shown on record. \$250,000.00 5b. Amount of Capital Contributions in Ft OFIIDA | | |
| 2. Malling Address | 100 | | 4. State or Country of Formation | Conti to da | ibutions in FLORIDA le: | |
| Z. Mailing Address | 28. Principal Office Address | | FL | | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | <u> </u> | Applied For | |
| City & State | City & State | City & State | | | Not Applicable | |
| Zip Country | Zip Country | | 7. Certificate of Status Desired | 24 | \$8.75 Additional Feo Required | |
| | | | | 8. Make check payable to: Dept. of State (See reverse side for fee informat | | |
| 0 11 | | | 10 | | | |
| 9. Name and Address of Current Registered Agent KADOCH, DAVID 1250 N.W. 124TH AVENUE | | 10. If changed, new Registered Agent/Office Name | | | | |
| | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| PLANTATION FL 33323 | | Suite, Apt. #, e | #, etc. | | | |
| | | City | | FL | Zip Code | |
| 10a. Pursuant to the provisions of sections 620.1051 a for the purpose of changing its registered office agent. I am familiar with, and accept the obligation. SIGNATURE (Registered Agent Accepting Appointment) | or registered agent, or both, in the State of ons of section 620,192, Florida Statutes. | amed limited partners Florida Such change | thip organized or registered under the laws of the was authorized by its general partner(s). I here | by accept the | da, submits this statemer appointment of registerer | |
| A GENERAL PARTNER THAT | T IS A CORPORATION ST BE REGISTERED A | , LIMITED I | PARTNERSHIP OR OTHER | | NESS ENTITY | |
| 11. Name(s) of General Partner(s) | 11a. Address of Each Ger (Do NOT Use Post Office | | 11b. City, State & Zip Code | 11c. | Registration/ Document Number | |
| KADOCH, DAVID | 1250 NW 124TH AVEN | | PLANTATION FL 33323 9000023 -11/13/ *****54 | 37-0) | | |
| Signatura di Silanda d | | į | 郑彬郑 林志祥 | | ****541.25 | |

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

de hereby certify that the Information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that tam a General Partner of the limited partnership, receiver or trusted

DATE OCT 20.97

Typed or Printed Name of General Partner Signing Form