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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

F9400005765 (2)

KAF-TECH, INC.

Principal Place of Business

Mailing Address

FILED
May 21 1998 8:00am
Secretary of State



12435 73RD COURT NORTH LARGO FL 34643			SS SAMUEL BARNET BOULEVARD NEW BEDFORD MA 02745		DO MOT WOLF IN THE	0.001.05		
		US	U\$		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified 11/07/1994			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	A	pplied For	
21		26	26		04-3245920	N	lot Applicable	
Suite, Apt	#, etc.		Suite, Apt. #, etc.			\$8.75	Additional	
22		27	27		5. Certificate of Status Desired	Fee R	lequired	
City & State		City & State	City & State		6. Election Campaign Financing		May Be	
23		28			Trust Fund Contribution		to Fees	
Žip	Country	Zip	Countr	y	8. This corporation owes or has paid the c	_ ′ -		
24	25	[29]	30		Personal Property Tax due June 30. 10. Name and Address of New Registere		No	
9. Name and Address of Current Registered Agent					81 Name			
CORPORATION SERVICE COMPANY			Ľ	Tycillic				
	01 HAYS STREET		8:	2 Street Ad	dress (P.O. Box Number is Not Acceptable)			
iA	LLAHASSEE FL 32301-2525		8:	3				
				1				
			B	1 City	F	85 Zip	Code	
11 Purcuant	to the provisions of Soctions 607.05	02 and 607 1508. Florida S	Statutes, the above	ve-named co	propretion submits this statement for the nurnose	of changing i	its registered	
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. Thereby accept the appointment as registered								
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature types or printed name of repetitively	eject as distlicit applicable	(NOTE: Registered A	gont signature rec	quired when reinstating) DATE			
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	
TITLE	PD	DELETE	E 1.1 TITLE			L Change	Addition 3	
NAME	WHEELER, ROBERT R		1.2 NAME				;	
STREET ADDRESS	55 SAMUEL BARNET BOUL	.evard	1.3 STREE	:1 ADDRESS			ļ	
CITY-ST-ZIP	NEW BEDFORD MA 02745			ST-ZIP				
TITLE	STD	DELETE	E 2.1 TITLE			L Change	Addition G	
NAME	KELLER, RAYMOND H		2.2 NAME	•				
STREET ADDRESS	999 MAIN ST., #36		2.3 STREI	ET ADDRESS				
CITY-\$1-ZIF	WARREN RI 02885		2. 4 CITY					
TITLE	D	[_] DELETI				Change	Addition	
NAME	PAPITTO, RALPH R		3.2 NAME					
STREET ADDRESS	6863 S.E. ISLE WAY		3.3 STRE	et address			į.	
CITY-ST-ZIP	STEWART FL 34996	Deleta	3.4. CITY			Channa	Addition	
TITLE	į	☐ DELET				L Change	L Addition	
NAME			4. 2 NAM					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		DELET	4 4 CHTY-			Change	Addition	
TITLE	1	LI VELCII				onunge		
NAME			52 NAME					
STREET ADDRESS			1	ET ADDRESS				
CITY-ST-ZIP		DELET	5.4 CHTY- E 6.1 THLE			Change	Addition	
TITLE		L. DCCCII	6.2 NAMI					
NAME				ET ADDRESS				
STREET ADDRESS								
CITY-ST-ZIP	certify that the information supplied	with this filing does not qua	6.4 CITY alify for the exem		in Section 119.07(3)(i), Florida Statutes. I further	certify that th	e 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 compratify for the required empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 10 or private the required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 10 or private with an address.