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 # F95000003385 (0)

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FILED

Apr 27 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address				I I I I I I I I I I I I I I I I I I I	KAN SINDA INIAN KRUBI BARA KADI	
8395 NW 53RD ST 8395 NW 53RD ST MIAM! FL 33166				DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified	
9 Principal D	lace of Business	2s. Mailing Address			07/14/1995 4. FEI Number	1 14
· ·	Tace of Bosiness	⊢n *				Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.			13-2569076	Not Applicable \$8.75 Additional
22	w, 010.	27			5. Certificate of Status Desired	Fee Required
City & Stat	8	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	try	8. This corporation owes or has paid the cu	_ ' _ '
24	25	29	30			Yes No
	9. Name and Address of Current	t Hegistered Agent		1 Name	10. Name and Address of New Registered	Agent
	PPEZ, HERNANDO			Isamo		
1	8395 NW 53RD ST MIAMI FL 33166		8	2 Street Add	dress (P.O. Box Number is Not Acceptable)	
, min	AMI FE 33 100		a	13		
1			-			7-7-0-4
				4 City	Fl	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the abo	ve-named cor	rporation submits this statement for the purpose cation's board of directors. I hereby accept the app	of changing its registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, F	lorida Statut	es.	allor's board or directors. Thereby accept the app	Militiness as registered
SIGNATURE	Signature, typed or printed name of registered age:				ured when rainstating) DATE	
12.	OFFICERS AND		13.	Oeur signature radi	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	DCP	DELETE	1.1 TITLE	<u> </u>		Change Addition
NAME	SHERMAN, FRED J		1.2 NAM	£		
STREET ADDRESS	3500 MYSTIC POINT DRIVE		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	AVENTURA FL		1.4 CITY	- ST- ZIP		
TITLE	DV	☐ DELETE	2.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
NAME	LOPEZ, HERNANDO		2.2 NAM	E		
STREET ADDRESS	1334 NW 102 DR		23 STRE	ET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 92663	The state		-ST-ZIP		
TITLE	DST ALFORDO	☐ DELETE	3.1 TITLE			Change L Addition
NAME	LOPEZ, ALFREDO 8359 SW 107 AVE		3.2 NAM	·		
STREET ADDRESS	MAIMI FL 33173			ET ADDRESS		
CITY-ST-ZIP	MAINI FE 33173	DELETE	4.1 TiTus	r-ST-ZIP		☐ Change ☐ Addition
NAME			4.2 NAM	- 1		
STREET ADDRESS				ET ADORESS		
CITY-ST-ZIP			4.4 CITY			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAM	E J		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY	- ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE	· -		☐ Change ☐ Addition
NAME			6.2 NAM	E		
STREET ADDRESS	_		6.3 STRE	ET ADDRESS		
CITY-ST-ZIP		\	6.4 CITY		Cooling 440 07/2VI) Florido Ctatutas I further o	

a nereby certify trial the information supplied with this tiling 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 appears in Block 12 or Block 13 if changed or or that attachment with an address.

SIGNATURE: J

1/24/98

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