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

**PROFIT** CORPORATION ANNUAL REPORT

1998

CITY - ST - ZIP

Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: MARGOT KATZ



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 10 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000005889 (9)

MKCO INVESTMENTS, INCORPORATED

Principal Place of Business Mailing Address ROYAL BANK OF CANADA TRUST COMPANY C/O KENNETH CLOWES, MD. P.O. BOX N-3024 **ROYAL BANK OF CANADA TRUST COMPANY** C/O KENNETH CLOWES. MD. P.O. BOX N-3024 DO NOT WRITE IN THIS SPACE NASSAU.NP.BAHAMAS NASSAU.NP.BAHAMAS 3. Date Incorporated or Qualified 12/04/1995 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0700718 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 Yes 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CORPORATION SERVICE COMPANY 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301-2525 83 В4 City 85 Zip Code 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 1097 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 11TITLE KATZ, MARGOT NAME 1.2 NAME CR2E034 ZURICHSTR. 52 STREET ADDRESS 1.3 STREET ADDRESS 8118 PFAFFHAUSEN SWITZERLAND CITY-ST-ZIP 1.4 City-St-ZiP DELETE Change Addition 21 TITLE TITLE KATZ, NORMAN NAME 2 2 NAME ZURICHSTR. 52 STREET ADDRESS 2.3 STREET ADDRESS 8118 PFAFFHAUSEN SWITZERLAND CITY-S1-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Channe TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP Change DELFTE Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

14. I 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 frue 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