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 # F96000003236 (4)

FILED May 01 1998 8:00am Secretary of State

KARLYN ENTERPRISES, INC. Principal Place of Business Mailing Address 7365 NW 7TH ST. 7365 NW 7TH ST. MIAMI FL 33126 MIAMI FL 33126 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>06/26/1996</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0680940 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zιρ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name FRANCO, MANUEL 7365 NW 7TH ST 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33126 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, 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. Lam 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 1/ILE TITLE Change ___ Addition FRANCO, MANUEL NAME 1.2 NAME 7365 NW 7TH STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33126** CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Change Addition 2.1 TITLE TITLE FRANCO, IDALIA NAME 2.2 NAME 7365 NW 7TH STREET STREET ADDRESS 2 3 STREET ADDRESS **MIAMI FL 33126** CITY-ST-ZIP 2. 4 CITY - S1 - 2IF DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS ÇITY-ST-ZIP 3.4. CHY - ST - ZIP DELETE 4.1 TO LE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - S1 - ZIP DELETE Change ☐ Addition 5 1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6 1 TITLE TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP

14. Thereby 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 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 on an attachment with an artifolis.

SIGNATURE:

**Material Amount of the corporation of the receiver of 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 on an attachment with an artifolis.

SIGNATURE:

**Autorial Amount of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicated on this annual report or 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 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 of the exemption indicated on this annual report is formation. In the formation indicated on this annual report of the certific that the information indicated on this annual report of the exemption indicated on the exemption indicated on the exemption indicated on the exemption indica

CR2E034 (10/9)