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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G25463

(2)

KENWOOD FINANCIAL, INC.

FILED Feb 03 1997 8:00am Secretary of State



Principal Place	e of Business	Malling Address			1			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4000 N FEDERA BOCA RATON	AL HWY STE 204 FL 33431	4000 N FEDERAL HWY S BOCA RATON FL 33431-							
					3. Date Incorporated or Qualified 02/24/1983	3a. Date 04/16	of Last 5/1996	•	
2. Principal Pl	ace of Business	2a. Mading Address		· · · · · · · · · · · · · · · · · · ·	4. FEI Number			Applied For	
21		26			52-1318551				
Suite, Apt #, etc		Suite, Apt, #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip 29	Count	ry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes X Yes No				
<u></u>	9. Name and Address of Curr			*****	10. Name and Address of New R				
RAL	ES, NORMAN		8	1 Name					
440 ADDISON PARK LN BOCA RATON FL 33432				82 Street Address (P.O. Box Number is Not Acceptable)					
BUC	A NATUN FL 33432		8	3					
l 			8	4 City		FL	85 Zip	Code	
## Pursuant	to the provinces of Sections 607.0	502 and 607 1508 Florida State	utos the sho	ua namo	d corporation submits this statement for the		hanging	ite ragistared	
office or r	egistered agent, or both, in the Sta	ate of Florida. Such change was	authorized	by the co	rporation's board of directors. I hereby acce	pt the appoi	ntment a	is registered	
_	m familiar with, and accept the ob-	ligations of, Section 607.0505, F	-iorida Statul	.es.					
SIGNATURE	Signature typed or printed name of registered	spent and trie it applicable INC	11F : Renistered A	ment signat r	re required when reinstating)	DATE			
12.		AND DIRECTORS	13.	·gork orginator	ADDITIONS/CHANGES TO OFFI		DIRECTO	RS IN 12	
TITLE	PD	☐ DELETE	1.1 TITL				Change		
NAME	RALES, NORMAN R.		1.2 NAM	Ε		,	•		
STREET AODRESS	-440 ADDISON PARK LN-		13 5186	ET ADDRESS	1007 Hillsboro Mile Hillsboro Beach, FL 3				
CITY - ST - ZIP	-BOCA RATON-FL-		1.4 CITY		Hillshorn Reach F1 3	3431			
TITLE	STD	DELETE	2.1 TITL				Change	Addition	
NAME	SAMPSON, MORRIS E.		2.2 NAM	Ε					
STREET ADDRESS	2701 N. OCEAN BLVD.		2.3 STRE	ET ADORESS	<i>.</i>				
CiTY-ST-ZIP	BOCA RATON FL			/- ST-ZIP					
TITLE		DELETE	3.1 TITLE				Change	Addition	
NAME			3.2 NAM	Ε		•	-		
STREET ADDRESS			3.3 STRE	ET ADDRESS	}				
CITY-ST-ZIP			3.4 CIT)	-ST-ZIP					
TITLE		DELETE	4.1 TITL				Change	Addition	
NAME			4. 2 NAN	ME			•		
STREET ADDRESS			4.3 STRE	ET ADDRESS					
CITY-ST-ZIP				- ST - Z(P					
TITLE		DELETE	5.1 1111			l	Change	Addition	
NAME			5.2 NAM	E					
STREET ADORESS			1	ET ADDRESS	1				
CITY-SI-7IP			5.4 CITY						
TITLE		DELETE	6.1 TITL				Change	Addition	
NAME			6.2 NAM				•		
STREET ADDRESS				= Et adoress					
CITY-ST-ZIP			•	-ST-21P					
	by certify that the information supp	lied with this filing does not qua			stated in Section 119.07(3)(i), Florida Statut	as. I further c	ertify the	at the	
	and the second s								

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 address.

Worman R. Rales 1/17/97 (561)392-3333