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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G39091

(5)

COMERCIAL KALA, INC.

FILED Apr 14 1998 8:00am Secretary of State

Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired For Example 27	Applied For Not Applicable 75 Additional se Required	
1504-B N. MIAMI BEACH FL 33179 DO NOT WRITE IN THIS SPACE	Applied For Not Applicable 75 Additional	
04/25/1983 2a. Mailing Address 4. FEI Number 21 26 59-2478493 5. Certificate of Status Desired 5. Certifi	Not Applicable 75 Additional	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 59-2478493 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27	Not Applicable 75 Additional	
Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired For Example 27	75 Additional	
22 5. Certificate of Status Desired L		
City & State 6. Election Campaign Financing \$5		
28 Trust Fund Contribution Ac	.00 May Be Ided to Fees	
Zip Country Zip Country 8. This corporation owes or has paid the current ye		
24 25 29 30 Personal Property Tax due June 30. XYes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	LI No	
ANIS, LOTTY TREPNER 81 Name		
20185 COUNTRY CLUB DR. 1504-B	82 Street Address (P.O. Box Number is Not Acceptable)	
N. MIAMI BEACH FL 33180		
84 City FL 85	Zip Code	
11. Pursuant to the provisions of Soctions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of chang 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 agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.	ing its registered nt as registered	
SIGNATURE		
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature regulated when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	CTORE IN 12	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN DELETE 1.1 TITLE		
NAME ANIS, LOTTY TREPNER 12 NAME		
STREET ADDRESS 20185 COUNTRY CLUB DR. #1504B 1.3 STREET ADDRESS		
CITY-ST-ZIP N. MIAMI BEACH FL 33180 1.4 CITY-ST-ZIP		
TITLE DELETE 2.1 TITLE Cha	ange 🔲 Addition	
NAME 2.2 NAME		
STREET ADDRESS 2.3 STREET ADDRESS		
CTY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Che	ange Addition	
	niñe (Nadirio)i	
NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS	ì	
STREET ADDRESS GITY-ST-ZIP 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
TITLE DELETE 4.1 TITLE Cha	ange Addition	
NAME 4.2 NAME		
STREET ADDRESS 4.3 STREET ADDRESS	Ì	
CITY-ST-ZIP 4.4 CITY-ST-ZIP		
TITLE DELETE 5.1 TITLE Cha	ange	
NAME 52 NAME		
STREET ADDRESS 5.3 STREET ADDRESS		
CITY-ST-ZIP 5.4 CITY-ST-ZIP		
TIFLE DELETE 6.1 TITLE C'NE	ange L. Addition	
NAME 6.2 NAME	ĺ	
STREET ADDRESS 6.3 STREET ADDRESS]	
CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify the	t 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 address.

SIGNATURE: