

NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Sep 14, 1999 8:00 am
Secretary of State

09-14-1999 90002 027 ***150.00

PROFIT CORPORATION ANNUAL REPORT **1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **G70852**
 Corporation Name
CL CORPORATION



Principal Place of Business
3725 S. OCEAN DRIVE
2
HOUSTON FL 33019

Mailing Address
19170 NW 80TH CT
2140 W 68TH STREET SUITE 402
MIAMI FL 33018
US

3725 S. OCEAN DR. #1512
HOLLYWOOD, FL 33019

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/21/1983

4. FEI Number
59-2338515

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property. Yes No

Principal Place of Business
3725 S. OCEAN DR

Suite, Apt. #, etc.
#1512

City & State
Hollywood FL

Zip
33019

Country
US

9. Name and Address of Current Registered Agent
FERNANDEZ, ERIC
3725 S. OCEAN DRIVE
#1512
HOLLYWOOD FL 33019

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

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.

NATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
DP FERNANDEZ, ERIC 3725 S. OCEAN DRIVE, #1512 HOLLYWOOD FL 33019	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
V FERNANDEZ, KATRINA L 3725 S. OCEAN DRIVE, #1512 HOLLYWOOD FL 33019	<input type="checkbox"/> DELETE	1.2 NAME	
S FERNANDEZ, CANDICE A 3725 S. OCEAN DRIVE, #1512 HOLLYWOOD FL 33019	<input type="checkbox"/> DELETE	1.3 STREET ADDRESS	
T FERNANDEZ LORENE 3725 S. OCEAN DRIVE, #1512 HOLLYWOOD FL 33019	<input type="checkbox"/> DELETE	1.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	2.2 NAME	
	<input type="checkbox"/> DELETE	2.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	2.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	3.2 NAME	
	<input type="checkbox"/> DELETE	3.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	3.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	4.2 NAME	
	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	4.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	5.2 NAME	
	<input type="checkbox"/> DELETE	5.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	5.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	6.2 NAME	
	<input type="checkbox"/> DELETE	6.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	6.4 CITY-ST-ZIP	

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 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: Eric Fernandez 7-1-99 305-7029248

CR2E034 (5/99)

PANAGOS & SALVER, P.A.
CERTIFIED PUBLIC ACCOUNTANTS

PAUL J. PANAGOS, C.P.A.
PAUL SALVER, J.D., C.P.A.

JAY D. MUSSMAN, J.D., C.P.A.

610852
614878

CORPORATE COURTS AT MIAMI LAKES
5881 N.W. 151st STREET
SUITE 101
MIAMI LAKES, FL 33014

DADE: (305) 823-3363
FAX: (305) 823-3545

August 19, 1999

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

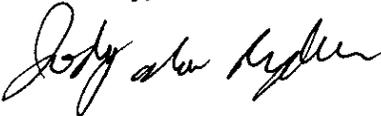
Re: KCL Corporation

Dear Sirs:

Enclosed herein please find the second notice for the 1999 Corporate Annual Report for the above referenced entity. Our client advised us that they never received the first notice to file their annual report from the State. Therefore, enclosed is the original \$150 filing fee. Please abate the \$400 late filing fee since our client never received the report.

Should you have any questions, you can contact me directly at extension 123. Thank you.

Sincerely,



Jody Alan Rydell

JAR/dv

Enclosure