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

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G99777

(6)

COMMENSATION ST. STR. SOC. DAVID SOCIAL

Mailing Address

KOHL INTERNATIONAL, INC.

3801-CW-47TH-0T,-0TE-506: DAVIE: 60014

ı	FILED
	Apr 25 1997 8:00am
	Secretary of State

CH CD

P.O. BOX 291525 FT. LAUDERDALE FL 33329		P.O. BOX 291525 FT. LAUDERDALE FL 33329-1525				Lea Date of Led Report	
					3. Date Incorporated or Qualified 03/16/1984	3a. Date of Last Report 05/01/1996	1
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied	
	S.WS2 SHIFF BILL	26		59-2419194	Not App		
Suite, Apt. 6		Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Require		
City & State		City & State			6. Election Campaign Financing	\$5.00 May	Be
20 VAV 16.		26			Trust Fund Contribution	☐ Added to Fe	
23 Zip FL	Country	Zip	Cou	ntry	8. This corporation has liability for	r intangible tax under s. 199. ☑ Yes ☐ No	.032,
24	25 BIZONARD	29	30		Florida Statutes  10. Name and Address of New R		
	9. Name and Address of Current	Registered Agent		81 Name		ogistorea rigent	
	il, david W. <del>I SW 47-av</del> e	[ ]		80	HL DAVID W.	1 b . L	
	-505/508		82 Street Add		ess (P.O. Box Number is Not Accepte SW 52 STREET &	41E \$12	
	1E FL 33314		ľ	83			
				84 City	14 (2)	B5 Zip Code	ə .
				1 DHV	NE	PLIBLA	14
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the at authorized	ove-named corp	poration submits this statement for the tion's board of directors. I hereby according	purpose of changing its reg apt the appointment as regis	jistered stered
agent La	m familiar with, and accept the obliga-	tions of, Section 607.0505, F	lorida Stat	utes.	1	11.102	
SIGNATURE	MARIC P KOHL	SEC FIR.	VIS Popletare	Agent signature requir	and when reinctating)	# //U/ 7/	
12.	Signature, typed or printed harne of registered agen OFFICERS AND		13.	Agent and racine radion	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN	12
TITLE	D	DELETE	1.5 TI				Addition
NAME	KOHL, DAVID W.		1.2 N/	ME K	COHL, DAND W.		
STREET ADDRESS	10431 SW 50TH ST		1.3 \$1	REET ADDRESS	o box 29152		
CITY-S1-ZIP	COOPER CITY FL		1.4 C	TY-ST-ZIP			T
TOLLE	DST	DELETE	2.1 TI	LE		L_  Change L_	Addition
NAME	KOHL, MARIE PATRICIA		2.2 N	ME			
STREET ADDRESS	9550 TOLEDO LANE			REET ADDRESS			
CITY-SI-7P	DAVIE FL	DELETE	2 4 C	TY-ST-ZIP		Change	Addition
TOLE NAME		- Deterie	32 N	· I			•
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				ITY-\$T-ZIP			
TITLE		☐ DELETE	4.1 71			Change _	Addition
NAME			4.2 N	AME			
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Caty - St - ZiP				TY-ST-ZIP			Tauasii
1/11.6		☐ DELETE	5.1 10			Change	] Addition
NAME			5.2 N				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		☐ DELETE	5.4 C 6.1 T	TY-ST-ZIP		Change	Addition
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NAME CHARCE ARMOR CO.				REET ADDRESS			
STREET ADDRESS				TY-ST-ZIP			
PH 1-91-74	L		0.40	·· · · · · · · · · · · · · · · · · · ·		the first and the state of	

14. I do 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: MAKIE' P KONL

945-791-0720