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

**PROFIT** CORPORATION ANNUAL REPORT

1997



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H93044

(6)

K & R GROUP, INC.

## **FILED** May 12 1997 8:00am Secretary of State



rancipal riace	Or Business	waming Address	waming Address					.,	
1000 CLINT MO BOCA RATON F	ORE ROAD. SUITE #110 FL 33487	1000 CLINT MO BOCA RATON			0				
					3. Date Incorporated or Qualified				
2. Principai Pla	ace of Business	2a. Mailing Ad	dress			4. FEI Number			Applied For
1		26				59-2624385	/		Not Applicabl
Suile, Apt. #, etc. 2		Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired	ď	\$8.75 Additional Fee Required	
City & State		City & State	e			Election Campaign Financing     Trust Fund Contribution			May Be d to Fees
Z(p)	Country 25	Zip <b>29</b>		Country 30	<i>'</i>		Yes [	No	r s. 199,032,
	9. Name and Address of Curre	ent Registered Agen	t		Ţ	10. Name and Address of New Re	gistered A	gent	
END	elson, Kenneth M.			81	Name				
1000 CLINT MOORE ROAD, SUITE 110 BOCA RATON FL 33487					]	dress (P,O. Box Number is Not Acceptable)			
	• • • • • • • • • • • • • • • • • • • •			63					
				84	City		FL	<b>B</b> 5 Z	p Code
	Signature typed or printed name of registered a	····	(NOT		eni argnatura req	juired when reinstating)	DATE	DIDECT	000 IN 40
12.		NO DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFIC		Chang	
IIId	PTD CON VENNETH		DETELE	1.1 TITLE			•	Ullang	e L. AQUIDO
NAME OXILET ASSOCION	ENDELSON, KENNETH  1000 CLINT MOORE RD #11	ıΛ		12 NAME	T ADDOCAG				
STREET ADDRESS	BOCA RATON FL	IU			T ADDRESS				
OTY-ST-ZIP OTCE	VSD VSD		DELETE	1.4 CITY - 2.1 TITLE	51-212			Chano	e Additio
NAME	FINKLESTEIN, RICHARD	••••		2.2 NAME			•		
STREET ADDRESS	1000 CLINT MOORE RD #11	Ю		2.3 STREE	T ADDRESS				
CifY-SI-ZiP	BOCA RATON FL	-		2. 4 CITY-	ST-ZIP				
THLE			DELETE	3.1 TITLE				Chang	e 🔲 Additio
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREE	T ADDRESS				
CITY -\$1 - 7IP			DELETE	3.4. CITY	ST-ZIP		····	T Observe	4.440
F: TLE		L	DELETE	4.1 TITLE			,	Chang	e Additio
NAME				4. 2 NAM	Į.				
STREET ADDRESS					T ADDRESS				
DITY-ST-2IP			DELETE	4.4 CITY - 5.1 TITLE	51 · ZIF			Chang	e Additio
IAME				5.2 NAME			•		
STREET ADDRESS					T ADDRESS				
CITY - ST - ZIP				5.4 CHTY-					
TIT.E			DELETE	6.1 THTLE				Chang	e Additio
NAME				6.2 NAME					
STREET ADDRESS				63 STREE	T ADDRESS				
CITY-51-70°				6.4 CITY -					
14. I do hereb	by certify that the information supply	lied with this filing doe	es not quali	ify for the ex	emption stat	led in Section 119.07(3)(i), Florida Statute	s. I further	certify th	nat the

empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name agaderess.