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**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

J68426

(2)

KOHLY, INC.

Principal Place of Business	Mailing Address		
351 NORTHWEST LEJEUNERL 205 MIAMI FL 33128	PO BOX 143648 COARAL GABLES FL 33114 US		

**FILED** Apr 27 1998 8:00am Secretary of State



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STORY   STATE	NIN FREDERICK L		81 Name	20-1-1101	12,12
11. Pursuant to the provisions of Soctions 602.0500 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in substitute of 1 yerds. 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 higherprises of Sealing 607 6056, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the higherprises of Sealing 607 6056, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the higherprises of Sealing 607 6056, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the higherprises of Sealing 607 6056, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the higherprises of changing its registered agent. I am familiar with, and accept the higherprises of changing its registered agent. I am familiar with, and accept the higherprises of changing its registered agent. I am familiar with, and accept the higherprises of changing its registered agent. I am familiar with, and accept the higherprises of change in a purpose of changing its registered agent. I am familiar with, and accept the higherprises of changing its registered agent. I am familiar with, and accept the higherprises of change in a purpose of changing its registered agent. I am familiar with, and accept the higherprises of changing its registered agent. I am familiar with, and accept the higherprises of changing its registered agent. I am familiar with, and accept the higherprises of control	10405 SW 89 PLACE	167505W 1605	P3 Street Ade		
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12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.	SIGNATURE		Frederic	K L. NIN	4/15/98
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64 CITY-ST-ZIP  64 CITY-ST-ZIP  64 CITY-ST-ZIP  14 Libereby 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 that the information	CITY-ST-ZIP	31. At 2 Charles and 2 Charles	6.4 CITY-ST-ZIP	Cooling 410 07/03/31 Florido Children	fruitness a attitute that the infance of the

Indicated on this annual report or supplied with this limit goods not quality for the exemption stated in Section 119.07(5)(f), Florida Statutes. Turner certify that the informatic 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 recover of 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 attraction with an address

Freibrick / Nin 4/15/98 (305) 235-5332