

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Shedra B. Mortman
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 06 1996 8:00 am
Secretary of State

DOCUMENT # **K16757** (2)
1. Corporation Name
KESHBRO, INC.



Principal Place of Business

6730 BISCAYNE BLVD
MIAMI FL 33138
US

Mailing Address

6730 BISCAYNE BLVD
201
MIAMI FL 33138
US

2. Principal Place of Business

2a. Mailing Address

21 State Apt. # etc.
22 City & State
23 Zip
24 Country

26 State Apt. # etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

%WEISS & HERNANDEZ
1401 BRICKELL AVE.
SUITE 300
MIAMI FL 33131

3. Date Incorporated or Qualified 03/02/1988	3a. Date of Last Report 04/18/1995
4. FEI Number 65-0057890	Applied For Not Applicable
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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
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

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to 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.

SIGNATURE

Signature of the person authorized to sign this report on behalf of the corporation

Signature of the Registered Agent (signature required after recording)

(42)

12. OFFICERS AND DIRECTORS	
NAME	PS
NAME	GIHWALA, HARISH J.
STREET ADDRESS	5101 BISCAYNE BLVD.
CITY-STATE-ZIP	MIAMI FL
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	☐ Change ☐ Addition
2. NAME	P. GIHWALA, HARISH J.
3. STREET ADDRESS	5101 Biscayne Blvd
4. CITY-STATE-ZIP	Miami, FL 33137
5. TITLE	V.P.
6. NAME	ASHWIN DEVIKAND
7. STREET ADDRESS	5101 Biscayne Blvd
8. CITY-STATE-ZIP	Miami, FL 33137
9. TITLE	SEC
10. NAME	GIHWALA, KALPANA; H.
11. STREET ADDRESS	6730 Biscayne Blvd.
12. CITY-STATE-ZIP	Miami, FL 33138
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that I am an officer or director of the corporation or the registered or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 (change only) on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/26/96. (30x) 759-9408
Date: Day: Month: Year: Phone:

CR2E034 (12/95)