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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # K19040

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K & K ACCOUNTING & TAX SERVICE, INC.

FILED Apr 16 1997 8:00am Secretary of State

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STE. 221 FORT LAUDER	DALE FL 33319	STE. 221 Fort Lauder	RDALE FL 3331	9-5804						
TOTT ENOPER	OUTE I C OUT I					3. Date Inc	orporated or Qualified	3a. [Date of Last	Report
		•				03/18/	1988	03	3/11/1996	}
2. Principal Pi	ace of Business	2a. Mailing Ad	idress			4. FEI Num		· • • · · · · · · · · · · · · · · · · ·	<u>, </u>	Applied For
1		26				65-00	038678			Not Applicable
Suite, Apt. :	#, etc	Suite, Apt.	#, etc.			5. Certifica	te of Status Desired			Additional
2		[27]					i :			Required
City & Stale)	City & Stat	ie				Campaign Financing nd Contribution			O May Be d to Fees
Zip	Country	28 Zip		Country			poration has liability for			
4	25	29	30	¬ '		Florida S			No	5. 199.00Z,
		Current Registered Agen				10. Name a	nd Address of New R	egistered	Agent	
KEN	IDROT, KIMBERLY K			81	Name L	(ENT, D	SALA T			
	O STATE RD. 7			82			Number is Not Accepta	ble)		
	. 221			["	O# 001740	501065 (1 10: DOX 1	10/100 10 140(71000pia			
FOF	RT LAUDERDALE FL 33319	9		83						
	, *			84	City				85 Z	o Code
								<u>Fl</u>		
11. Pursuant office or re	o the provisions of Sections (egistered agent, or both, in the m familiar with, and accept the	607:0502 and 607.1508, FK se State of Election Such on	orida Statutes, iange was eut	, the above borized by	e-named corpo	orporation submits	s this statement for the directors. I hereby acce	purpose i	of changing pointment a	its registered is registered
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SIGNATURE	Siphature: yes die printed name of region of FICE	stered agent and life II applicable TRS AND DIRECTORS	HOTE F	Registered Age		equired when reinstating)	NS/CHANGES TO OFFI	4-9 DATE	-97	DRS IN 12
SIGNATURE 12. TITLE	Sipharus 57-10 puriod name of 109 OFFICE	stered agent and life II applicable TRS AND DIRECTORS		Registered Age		equired when reinstating)		4-9 DATE	-97	DRS IN 12
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imministration 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 of tam 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

(954)485-5252