

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 23 1998 8:00am
Secretary of State

DOCUMENT # **K19584** (7)
1. Corporation Name
KRYPTO INTERNATIONAL EXPORT, INC.



Principal Place of Business Mailing Address
1818 WEST FLAGLER, 2ND FLOOR **1818 WEST FLAGLER, 2ND FLOOR**
MIAMI FL 33135 **MIAMI FL 33135**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 Suito, Apt. #, etc.	26 Suito, Apt. #, etc.	3. Date Incorporated or Qualified 03/30/1988	
22 City & State	27 City & State	4. FEI Number 05-0041868	
23 Zip	28 Zip	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 Country	29 Country	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
25		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
29		30	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DASCAL, JACQUELINE
1818 WEST FLAGLER, 2ND FLOOR
MIAMI FL 33135

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 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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 on Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/12/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	DASCAL, JACQUELINE	1.2 NAME	
STREET ADDRESS	1818 WEST FLAGLER, 2ND FLOOR	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33135	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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

PPES

1/12/98 (305) 49-1111

CR2E034 (10/97)