

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K48539

FILED  
Jan 20, 2012  
Secretary of State

Entity Name: KINAL ENTERPRISES, INC.

**Current Principal Place of Business:**

C/O ALAN KURZWEIL  
5385 PALM AVENUE, SUITE 1  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 22546  
HIALEAH, FL 330022546

**New Mailing Address:**

FEI Number: 65-0090036

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KURZWELL, ALAN  
5385 PALM AVE.  
APT. 1  
HIALEAH, FL 33012 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: KURZWEIL, JODI L  
Address: 2000 ISLAND BLVD., #2603  
City-St-Zip: AVENTURA, FL 33160

Title: DVP  
Name: SIEBZEHNER, MARCIA R.  
Address: 567 FORT WASHINGTON AVE. #2G  
City-St-Zip: NEW YORK, NY 10030 US

Title: SD  
Name: KURZWEIL, JODI LYNN  
Address: 2000 ISLAND BLVD., #2603  
City-St-Zip: AVENTURA, FL 33160

Title: TD  
Name: OROVITZ, ESTA K  
Address: 14020 SW 104TH PLACE  
City-St-Zip: MIAMI, FL 33176

Title: PD  
Name: KURZWEIL, ALAN  
Address: 9591 SW 124 TERRACE  
City-St-Zip: MIAMI, FL 33176

Title: AS  
Name: LOZANO, BARBARA  
Address: 10471 NW 130 ST.  
City-St-Zip: HIALEAH GARDENS, FL 33018

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ALAN KURZWEIL

PRES

01/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date