CORP ANNUA	PROFIT PORATION AL REPORT <b>1997</b>			<b>B. Mortha</b> ary of State	m	Jan 31 Secre			
	Nent # Ka Name Perties, Inc.	74808	(2)			E EMAKONI DIKANDA DIA MADA DIKU		INI DINI DINI	ncahi inni
Principal Place o 6 Howard Schi 501 E Jackson I 58Lando FL 328	HEFERDECKER ST. 1ST FL	% H 501	ing Address Oward Schieferde E Jackson St. 181 Ando FL 32801-2859	FL		3. Date Incorporated or Qualifi	ed <b>3a</b> . Da	te of Last R	
2. Principal Plac		26	Mailing Address			03/23/1989 4. FEI Number 59-2948322	04/1	No	oplied For of Applicable
Suite, Apt. #, 2		27]	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State 3		28]	City & State			6. Election Campaign Financin Trust Fund Contribution	° 🗆	\$5.00 Added	
Zip 4	Count 25	29	Zip	Couni 30	try	8. This corporation has liability Florida Statutes	Yes [	] No	. 199.032,
SCHIE	EFERDECKER, HOV		ared Agent	8	1 Name	10. Name and Address of New	/ Hegistered A	(gent	
501 EA ORLAN	AST JACKSON STI NDO FL	reet		8	2 Street Add	dress (P.O. Box Number is Not Acce	ptable)		
						******			
		tions 607.0502 and 60 h, in the State of Horida	7.1508, Florida Statu a. Such change was	8	<ul> <li>City</li> <li< th=""><th>rporation submits this statement for t</th><th>FL he purpose of ccept the appo</th><th></th><th>Code s registerec registered</th></li<></ul>	rporation submits this statement for t	FL he purpose of ccept the appo		Code s registerec registered
<ol> <li>Pursuant to office or reg agent 1 ant SIGNATURE <u>5</u>1 2.</li> </ol>	a the provisions of Sec g sterod agent, or bol i familiar with, and act iterator, force or printed name C D	cept the obligations of, work registrict agencia of the if OF LICEHS AND DIRECT	Section 607.0505, F	Ites, the abc authorized forida Statut otE Registered A 13. 1.1 HIL	City Dive-named cor by the corpora les.	rporation submits this statement for t ation's board of directors. I hereby an ured when reinstating) ADDITIONS/CHANGES TO O	he purpose of ccept tho appo DATE FFICERS AND	changing it pintment as	s registered registered
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