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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L05753

(3)

KAYAL ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED May 12 1997 8:00am Secretary of State



10068 SW 117 CT MIAMI FL 33188		10088 SW 117 CT MIAMI FL 33188-8521		Date Incorporated or Qualified	3a. Date of Last Report
				07/28/1989	08/09/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0178775	Applied For
21		26			Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		Of Continents of Status Excellent	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country		[28]		Trust Fund Contribution	
24 Zip	 	Zip	Country	8. This corporation has liability for in	
[24]	9. Name and Address of Curr	[29] rent Registered Agent	30	Florida Statutes X 10. Name and Address of New Reg	Yes No
B4 11					ristored Agent
10068 SW 117 CT			130	AN F. KAYAL	
	MI FL 33186		82 Street Add	tress (P.O. Box Number is Not Acceptable 3/5 w 88 + 5+	(e)
. 1093	MI 12 00 100	•	83		
			Swi	ite 7-17	
			84 MY XM	11 F 23/96	FL 85 33776
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 an lorized by the corporation's poard of directors. I hereby accept the appointment as registered agent. I am tamilies with, and accept the obligations of, Section 607.0505, Exida Statutes.					
SIGNATURE	BRIAN HA Signature, typed or printed name of registered	VAL CA	Jan Hack	Lured when reinstating)	15/97
12.		AND DIRECTORS	13	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 LE		Change Addition
NAME	KAYAL, BRIAN FRANK		1.2 ME		;
STREET ADDRESS	10068 SW 117 CT		1.3 EET ADDRESS	W ₂	[
CITY-ST-ZIP	MIAMI FL	T or or	1.4 Y-ST-ZIP		
TITLE	D Kayal, Sandra P.	DETEJE	21 LE		Change Addition
NAME	10068 SW 117 CT		2.2] ME		
STREET ADDRESS	MIAMI FL		23 HEET ADDRESS		
CITY-ST-ZIP TITLE	MICMI FL	DELETE	2. 4 (TY-ST-ZIP 3.1 T/LE		Change Addition
NAME		£ Detere			[] Change Addition
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TOLE		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 CHY-ST-ZIP		
TALE		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 do 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 eath, that I am an officer or director of the corporation or the receiver 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 if changed, or on an attachment with an address.

305-271-7253