FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 15 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3)L05753 KAYAL ENTERPRISES, INC. Principal Place of Business Mailing Address 16501 SW 81 AVENUE 16501 SW 81 AVENUE **MIAMI FL 33157** MIAMI FL 33157 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/28/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 Not Applicable 26 65-0178775 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 29 30 Personal Property Tax due June 30, 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KAYAL, BRIAN FRANK 10637 SW 88TH-ST 82 SUITE JH MHAMI FL 33176 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 of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Addition DIRECTOR Change TITLE 1.1 TITLE BRIAN F. KAYAL 16501 SW815T AVE, KAYAL, BRIAN FRANK NAME 10068 SW 117 CT STREET ADDRESS 1.3 STREET ADDRESS MIAMI MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE DIRECTO Change Addition TITLE 2.1 TITLE SANDRA P. KAYAL KAYAL, SANDRA P. NAME 2.2 NAME 16501 SW 81 of AVE. 10068 SW 117 CT STREET ADDRESS 2 3 STREET ADDRESS MIAMI, FL 3315 MIAMI FL CITY-ST-ZIP 2. 4 City-St-ZiP DELETE Change Addition TITLE 31 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change 4.1 TITLE Addition TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CiTY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition 6.1 TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

14. Thereby 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

STREET ADDRESS CITY-ST-ZIP

Block 12 or Block 13 if changed