

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

Amended

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 125556
1. Corporation Name

KOLBO INC.

Principal Place of Business

2390 N.W. 46th St.
Miami, FL 33142

Mailing Address

1150 N.W. 72nd Av. #307
Miami, FL 33126

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

Hector Gil
12515 S.W. 114th Ave.
Miami, FL 33176

3. Date Incorporated or Qualified
10/26/89

3a. Date of Last Report
4/1/97

4. FEI Number
65-0157996

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

Florida Marmolejos
Street Address (P.O. Box Number is Not Acceptable)
12000 S.W. 84th Ave.

83

84

City Miami

FL

85

Zip Code 33156

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 entering with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Florida Marmolejos*

President

12/15/97

12. OFFICERS AND DIRECTORS

TITLE D/P/
NAME Hector Gil
STREET ADDRESS 12515 S.W. 114th Ave.
CITY, ST, ZIP Miami, FL 33176

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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CITY, ST, ZIP

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NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D/P/T/S
12 NAME Florida Marmolejos
13 STREET ADDRESS 12000 S.W. 84th Ave.
14 CITY, ST, ZIP Miami, FL 33156

15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY, ST, ZIP

19 TITLE
20 NAME
21 STREET ADDRESS
22 CITY, ST, ZIP

23 TITLE
24 NAME
25 STREET ADDRESS
26 CITY, ST, ZIP

27 TITLE
28 NAME
29 STREET ADDRESS
30 CITY, ST, ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 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)(c), 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 of this report, or on an attachment with an address.

SIGNATURE: *Florida Marmolejos* Florida Marmolejos Pres.

12/15/97