

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L52077** (9)
1. Corporation Name
A. K. ASSOCIATES, INC.



Principal Place of Business: **% KENNETH F. RUDMAN 10725 S.W. 134TH TERRACE MIAMI FL 33176**
Mailing Address: **% KENNETH F. RUDMAN 10725 S.W. 134TH TERRACE MIAMI FL 33176**

2. Principal Place of Business: 21 **1140 SAN Pedro AVE** Suite, Apt. #, etc. 22
City & State: 23 **CORAL GABLES, FLA**
Zip: 24 **33156** Country: 25 **DADE**
2a. Mailing Address: 26 **1140 SAN Pedro AVE** Suite, Apt. #, etc. 27
City & State: 28 **CORAL GABLES, FLA**
Zip: 29 **33156** Country: 30 **DADE**

3. Date Incorporated or Qualified: **02/19/1990** 3a. Date of Last Report: **03/21/1995**
4. FCI Number: **59-3003055** 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. 199.032, Florida Statutes: Yes No
10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
**RUDMAN, KENNETH F.
10725 S.W. 134TH TERR. 1140 SAN Pedro AVE
MIAMI FL 33176 CORAL GABLES, FLA 33156**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.04(2) and 607.16(3), 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ Date: _____

12. OFFICERS AND DIRECTORS

TITLE	DVP	<input type="checkbox"/> DELETE
NAME	RUDMAN, KENNETH F.	
STREET ADDRESS	10725 S.W. 134TH TERRACE 1140 SAN Pedro AVE	
CITY-ST-ZIP	MIAMI FL CORAL GABLES FLA 33156	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	MOLINA, ALBERTO	
STREET ADDRESS	1025 S.W. 74TH COURT	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 if changed, or on an attachment with an address.

SIGNATURE: Kenneth F. Rudman **Kenneth F. Rudman** March 23, 1996 305-669-0440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)