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PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

KONOVER MOBILE, INC.

Principal Place of Business

Mailing Address

FILED May 06 1997 8:00am Secretary of State



	CA RATON		TA HOAD, GUIL Y	•••		TON FL 33433-3		IUND, U	U112 400								
										3. Date Incorporated or Qualified 06/21/1990		3a. Date of Last Report 05/01/1996					
2, Principal Place of Business			2	2a. Mailing Address						4.	El Number				Applied	For	
21			26	26						65-0301170 Not Applica							
Suite, Apt. #, etc.				Suite, Apt. #, etc.						5. Certificate of Status Desired \$8.75 Additional							
City & State			27	City & State					Fee Required								
23				28						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees							
20	Zip	p Country						Country	untry			R. This corporation has liability for integral ble tax under s 199.032,					
24	•	ļ	25	29	9		30			Florida Statutes Yes No							
		¥1	and Address of	Current Reg	istered	Agent				1	10. l	Name and Address of N	ew Rb	islered /	gent		
ASHENFELTER, MARIA S. KONOVER MANAGEMENT SOUTH, INC. 7000 WEST PALMETTO PARK ROAD, SUITE 408 BOCA RATON FL 33433							81 82 83	Name Street	Address	s (P.0	D. Bax Number is Not Ac	ceplab	le)				
								84	City	··				FL	85 Z	ip Code	
11	office or re	egistered ag	ient, or both, in th	ic State of Fig	orida Sud	ch change was	author	rized by	the corp	corpora oration	ation 's bo	submits this statement for eard of directors. I hereby	or the p accep	urpose of	changin ointment	g its reg as regis	stered tered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statute's. SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE																	
12			OFFICE	RS AND DIR	(CTORS			13.			ΑI	DDITIONS/CHANGES TO	OFFIC	ERS AND	DIRECT	ORS IN	12
1111	LE	DC				DELETE	1	1 1 TITLE							Chang	je 📘	Addition
NA	VIE .				. 1.2 N			1.2 NAME									- 1
STREET ADDRESS 51 TUMBLEBROOK LANE WEST HARTFORD CT			Æ	3			3 STREET ADDRESS									\{	
	Y-ST-ZIP		ARTEURD CT			Detrese		1.4 CITY - S	I - ZIP		·				I (0)		7 3 200 L
TIT		DP	אטע בסבת ח			DELETE		2.1 1 11.6							☐ Chang	Se [7]	Addition
NAME STEINMARK, FRED P. STREET ADDRESS 3757 NW 52ND STREET			r				2.2 NAME 2.3 STREET ADDRESS										
	Y-ST-ZIP	BOCA R		ı				2. 4 CITY - 5									}
TIT		DTS				DELETE		3.4 TITLE	01-111						Chang	e []	Addition
NAI			ELTER, MARIA	S .			3	3 2 NAME									
STF	REET ADDRESS		W. 13TH ST				3	3.3 S 1REET	ADDRESS								1
cm	Y-ST- Z IP		ERDALE FL					3.4. C(1 Y - S	\$1 - <i>21</i> P								
TITI	E	DV				DELFTE	4	4.1 TITLE							☐ Chang	ge []	Addition
NA	ME		JONATHAN P.				4	4. 2 NAME									
	REET ADORESS		69TH STREET					4.3 STREET									
_	Y-ST-ZIP	NEW YO	HK NY		<u> </u>	DELETE		4.4 CITY-S	T-ZIP						Chang		Addition
1111						L. DELETE		51 IIILE	į						☐ Criang	}e	Addition
NA							- 1	52 NAME	1000100								
	REET ADDRESS Y-S1-ZIP							5.3 \$TREE1 5.4 CITY - S									
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NAI						_		6.2 NAME									1
i	EET ADORESS							6.3 \$1REET	ADDRESS								ļ
CIT	Y-ST-ZIP							6.4 CITY - S	11 - ZIP								

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 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.