

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 APR 29 AM 11:52

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE DIVISION OF CORPORATIONS

L9700000629

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company

DOCUMENT # L97000000629

KAG MANAGEMENT & TRADE, L.C.
725 N. Alternate 11A, Suite E-205
Jupiter, FL 33477

1a. Principal Place of Business Address

725 N. Alternate 11A, Suite #-205
Jupiter, FL 33477

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country

3. Date Organized or Qualified 06/09/1997

3a. State of Formation FL

4. FEI Number 59-3472108

5. Date of Last Report

6. Certificate of Status Desired

7. Name and Address of Current Registered Agent

CAPITAL CONNECTION, INC.
417 E. VIRGINIA STREET, SUITE 1
TALLAHASSEE FL 32301

8. Name and Address of New Registered Agent/Office

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City Zip Code
FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named Limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE *[Signature]* DATE 13 APRIL 1998

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	KADJI, GILBERT	15 RUE DU CENDRIER, CASE P	1211 GENEVA SWITZERL

200002514082-1
-05/06/98-0112-004
****188.75 ****188.75

MR
4/29/98

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE 13 APRIL 1998

SMALLER SIGNATURE PRINTED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER