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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

M44861

(6)

KDK INTERNATIONAL, INC.							
Frincipal Place	of Business	Mailing Address			TO STATE OF THE ST	ALIYOT KABA BABAL BABAL BABA	1 <b>6 (8 () 9 (8 () 1 1 () 1</b>
10746 N.W. 21 ST. CORAL SPRINGS FL 33071		10746 N.W. 21 ST. CORAL SPRINGS FL 33071					
					3. Date Incorporated or Qualified	3a. Date of Last	! Report
2 Principal D	ace of Business	0-11-	<del></del>		01/15/1987	06/14	1/1995
21 Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2851358	60	Not Applicable 75 Additional	
22		27		5. Certificate of Status Desired	7	e Required	
City & State		City & State			6. Election Campaign Financing	<u> </u>	.00 May Be
7 <sub>(D</sub>	Country	28	т ::	<del></del>	Trust Fund Contribution	Ad-	ded to Fees
24	[]		Country	<i>'</i>	8. This corporation has liability for intangible tax under si 199.032,		
24   25   29   30   9. Name and Address of Current Registered Agent			1301		Florida Statutes Yes No  10. Name and Address of New Registered Agent		
			81	Name		iografio de Algeria	
Beers, Kenneth E., Jr.			82	Street Ac	ddress (P.O. Box Number is Not Acceptab	la)	
10746 N.W. 21 ST.						no,	
CORA	L SPRINGS FL 33071		63				
			84	City		<b>—.</b> 85	Zip Code
11. Pursuant t	a the provisions of Sections 607 0502	and 607 1508 Elorida Statuto	o the shows	nomed and	poration submits this statement for the pur	<u>FL    </u>	
	ed agent, or both, in the State of Florida h, and accept the obligations of, Section			oration's b	poration submits this statement for the purposer of directors. I hereby accept the appo	pose of changing it ointment as register	s registered office ed agent. I am
S'GNATURE	an, and dooopt the designations of, decire	an contionos, inolida statutes					
	Signature typod or printed name of registered agent a		TE: Flogistered Ager	nt signature requ	uired when reinstating)	DATE	
12.	OFFICERS AND		13,		ADDITIONS/CHANGES TO OFFI	ICERS AND DIREC	TORS IN 12
TITLE	PD PEEDS ASSAULTIA S ID	☐ DELETE	1. 1 TITLE			☐ Chang	e 🔲 Addition
STREET ADDRESS	BEERS, KENNETH E., JR. 10746 N.W.21 ST.		1.2 NAME				
CITY-ST-ZIP	CORAL SPRINGS FL		1.3 STREET ADDRESS				
TITLE			1.4 C(TY - S 2. 1 T(TLE	1 - ZIP		[7] Change	a C Addition
NAME	BEERS, DEBORA A.		2.2 NAME				e 🗌 Addition
STREET ADDRESS	10746 NW 21ST ST.		2 3 STREET	ADDRESS			
CITY - SI - ZIP	CORAL SPRINGS FL		2.4 CITY - ST - ZIP				
TILE		☐ DELETE	3. 1 TITLE			☐ Change	e 🔲 Addition
NAME			3.2 NAME				
STREET ADDRESS	33.1		3 3. STREET	ADDRESS			
CITY-S1-ZIP TITLE		DELETE	3 4 City-S	T-ZIP			
NAME		[1] precie	4. 1 TITLE			☐ Change	e 🔲 Addition
STREET ADDRESS			4.2 NAME 4.3 STREET	4000000			
CITY-ST-ZIP							
THE		DELETE	4.4 CITY - ST	1- ZIF		☐ Change	e
NAME			5.2 NAME				, LI ROSHOT
STREET ADDRESS			5.3 STREET	ADDRESS			
C11 Y - S1 - Z1P			5 4 CITY - S				
TILLE		☐ DELETE	6 1 TITLE			☐ Change	e Addition
NAME			62 NAME				
STREET ADDRESS			63 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST	r-ZIP			

14. Ido 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 it made under oath; that I am an officer or director of the companion or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 it of page 15.

SIGNATURE:

TYPE O OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/96

305 755 4413

CR2E034 (12/95