

FILED
Feb 18, 2003 8:00 am
Secretary of State

02-18-2003 90095 018 ***150.00

1. Entity Name
KENILWORTH VENTURES, INC.



Mailing Address
400 S POINTE DRIVE
SUITE 2401
MIAMI BEACH FL 33139

3. Mailing Address

Suite, Apt. #, etc.

City & State

Country

Not Applicable

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Zip Code

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10.	OFFICERS AND DIRECTORS
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ~ ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition

2. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone # _____

2/13/03

305-532-5176

CR2E034 (10/02)