FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 17 PM 1:20

DOCUMENT # **P39184** **(7)**

1. Corporate Name
KAH, INC.

Principal Place of Business	Mailing Address
27 WILLIAM ST. NEW YORK NY 10005	27 WILLIAM ST. NEW YORK NY 10005

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/08/1992**	3a. Date of Last Report: **02/01/1994**		
4. FEI Number: **13-3487075**		☐ 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			

2. Principal Place of Business	2a. Mailing Address
21	26
State, Apt. #, etc. 22	State, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

MARKS, STANLEY
2875 NE 191ST ST.
NORTH MIAMI BEACH FL 33180

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
PV HIPKINS, KENNETH A. 27 WILLIAM ST. NEW YORK NY	☐ Change ☐ Addition
TD HIPKINS, KENNETH A. 27 WILLIAM ST. NEW YORK NY	☐ Change ☐ Addition
S CRISCITELLO, MARK 27 WILLIAM STREET NEW YORK NY	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition

14. I/We certify that the number of employees supplied with this report voluntarily furnished and 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 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 with an address.

SIGNATURE: Mark Criscitello 1/10/95 (212) 801-0312
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER — DATE — TELEPHONE NUMBER

0000007 CP