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FILED

Jan 31 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P92000012719 (0)

1. Corporation Name

AKI (KIRSCHNER), INC.



Principal Place of Business

2800 NW 75TH STREET
MIAMI FL 33147
US

Mailing Address

731 SW 69TH AVE.
PEMBROKE PINES FL 33023-1183

3. Date Incorporated or Qualified

12/16/1992

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0378769

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

21 6970 N.W. 36th Ave.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

Miami FL

28 City & State

28 City & State

24 Zip

33147

25 Country

25 Country

29 Zip

29 Zip

30 Country

30 Country

9. Name and Address of Current Registered Agent

KIRSCHNER, JACK B
731 SW 69TH AVE.
PEMBROKE PINES FL 33023

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D KIRSCHNER, JACK B DELETE

NAME KIRSCHNER, JACK B
STREET ADDRESS 731 SW 69TH AVE.
CITY-ST-ZIP PEMBROKE PINES FL 33023

TITLE D KIRSCHNER, JACK A DELETE

NAME KIRSCHNER, JACK A
STREET ADDRESS 731 SW 69TH AVE.
CITY-ST-ZIP PEMBROKE PINES FL 33023

TITLE D KIRSCHNER, RICHARD B. DELETE

NAME KIRSCHNER, RICHARD B.
STREET ADDRESS 13215 SW 57TH TERRACE BLDG 20 #7
CITY-ST-ZIP MIAMI FL

TITLE DELETE

NAME DELETE

STREET ADDRESS DELETE

CITY-ST-ZIP DELETE

TITLE DELETE

NAME DELETE

STREET ADDRESS DELETE

CITY-ST-ZIP DELETE

TITLE DELETE

NAME DELETE

STREET ADDRESS DELETE

CITY-ST-ZIP DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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.

SIGNATURE: Jack B. Kirschner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/27/97 305-696-5626

CR2E034 (9/96)