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May 01 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 # P93000015057 (1)			
1. Corporation Name KIMBERLEY TRADING CORP.			
Principal Place of Business 2292 SOUTH S.R. 7 MIRAMAR FL 33023		Mailing Address 2292 SOUTH S.R. 7 MIRAMAR FL 33023-3057	
2. Principal Place of Business 21 2290 South STATE RD 7		2a. Mailing Address 26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22 City & State MIRAMAR FL		27 City & State	
23 Zip 33023		28 Country USA	
24		30	
9. Name and Address of Current Registered Agent BALDOR, BERTA C 2292 SOUTH S.R. 7 MIRAMAR FL 33023		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 2290 SOUTH STATE ROAD 7 83 84 City MIRAMAR FL 85 Zip Code 33023	
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 <i>BERTA C. BALDOR</i> BERTA C. BALDOR 4/25/97 Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating.) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	STREET ADDRESS	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
CITY - ST - ZIP	CITY - ST - ZIP	2.1 TITLE	2.2 NAME
		2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
		3.1 TITLE	3.2 NAME
		3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
		4.1 TITLE	4.2 NAME
		4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
		5.1 TITLE	5.2 NAME
		5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
		6.1 TITLE	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: <i>BERTA C. BALDOR</i> BERTA C. BALDOR 4/25/97 (954) 989-0400 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			



CR2E034 (9/96)