## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 803000037355

FILED Mar 07, 2003 8:00 am Secretary of State

1. Entity Nam	K HOLDINGS CORPORATIO				03-07-	2003 9008	8 001	***150.00
	ce of Business S RD, 2ND FLOOR , FL 33431 US	Mailing Address 2250 GLADES RD, 2ND FL BOCA RATON, FL 33431						
2. Principal F Sulte, Apt.	Place of Propiness RIKUSHMOEPL #, etc.	3. Mailing Address 475 SE1 Suite, Apt. #, etc.	JOME D	<u>e</u>	CHECK HERE II			
City & Stat	Patro FI	Dort State	uefL	4. FE	Number 65-0418901		<del></del>	optied For
33U	28 Country A	34984	Country	. 5. Ce	rtificate of Status Desired	□ \$8 Fee	.75 Add	ditional
	6. Name and Address of Current	Registered Agent	Name	7. Na	me and Address of New R		<u> </u>	
CRANE, SCOTT					P.O. Box Number is Not Acceptable)			
	,		City			FL	Zip Cod	ie .
B. The above	named entity subplits this statement to	r the purpose of changing its r	1 -	egistered agen	t, or both, in the State of Flo		•	1
the obligate	tions of regustered agent.	Lon 75,000	·			3/5/0	, 5-	
		multifie il applicable. (NOTE:	Registered Agents ignatua	equired when rains	· ·	CATE		
Muse cher	FILE NOWN FORE IS \$180 OC (May 1, 2005) Fee will be \$550,00 (Mayor) Forest Casartment :	u suut			<ol> <li>Election Campaign Finance Trust Fund Contribution</li> </ol>			May Bed to Fees
10.	OFFICERS AND		11.		TIONS/CHANGES TO OFFI			
TITLE NAME STREET ADDRESS CITY-ST-ZP	CRANE, SCOTT 2250 GLADES RD 2ND FL BOCA RATON, FL 33431	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	52281 52281 520HC	rane Rushmore Rator, Fl		Change 28	Addition  Addition
TITLE NAME	V SIEGEL, ROBERT	☐ Defeite		Rober	t. Siesel	28	Change	Addition
STREET ADDRESS CITY-ST-ZP	2250 GLADES RD 2ND FL BOGA RATON, FL 33431		STREET ADDRESS City-St-Zip	12907 Boca	Ityland ar	614 3342	8~	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS				Change	Addition
TITLE		☐ Delete	TITLE	ř			Change	Addition
NAME STREET ADDRESS CITY-ST-ZP			NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP -				Change	☐ Addition
	Destrify that the information supplied with ton this report or supplemental Pepert is poration or the receiver or trustee employees. Or on an attachment with an active s. y.	this filiph does not qualify for it true and accurate and that me were to execute this report a		d in Section 119 re the same leg ter 607, Florida	9.07(3)(i), Florida Statutes. I al effect as if made under or Statutes; and that my name	further certify t ath; that I am a appears in Bi	hat the in in officer ock 10 or	nformation or director r Block 11 if