## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 12 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000043168 (2)

KES-SOL DEVELOPMENT CORP.

Principal Place of Business Mailing Address							DRIN ANÎDA KILDI MÂND	91(8) (81) (89)
10922 NW 18 PLACE		PO BOX 17446	PO ROY 17446			1		
PLANTATION FL \$3322			PLANTATION FL 33318-7446					
US		US	US			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						06/17/1993		
2. Principal f	Place of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0417760		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc.				□ \$8.75	Additional
22		27	27			5. Certificate of Status Desired	Fee	Required
City & State		City & State	City & State			6. Election Campaign Financing	\$5.0	0 May Be
23		28	28					d to Fees
Zip	Country Zip		Cour	Country		8. This corporation owes or has paid	·	
24	25	25 29 30				Personal Property Tax due June 3		<b>⊠</b> No
	9. Name and Address of Cur		1001			10. Name and Address of New Regi		-
IΔ	ZARUS, DAVID M			B1 Na	ame			
			L					
% DAVID LAZARUS M ESQUIRE			[:	<b>B2</b> St	reet Addre	ss (P.O. Box Number is Not Acceptable	)	
	15 GRIFFIN RD SUITE 403		ļ-	83				
U.P.	NNIA FL 33004			93				
				34 Ci	ty		- 85 Zi	p Code
							FL ºº '	
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								its registered
agent. I a	am familiar with, and accept the ob	ligations of, Section 607.050	5, Florida Statu	tes.	Corporatio	in a board of directors. Thereby accept	пс арропинов і	as registered
SIGNATURE								ł
V	Signature, typed or printed name of registered		(NOTE: Registered	Agent sig	nature required		DATE	
12	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICE		
TITLE	PS DELETE		1.1 TIT	1.1 TITLE			🔀 Changi	e Addition
NAME	SOLOVEY, JOSEPH		1.2 N		- {			Į
STREET ADDRESS	2375 NW 105TH AVE		1.3 STF	1.3 STREET ADDRESS 109		722 NW 18 PLACE		
CITY-ST-ZIP	PLANTATION FL		1.4 CIT	1.4 C(TY - S1 - Z(P		WTATION FL 3	33 <b>22</b>	
TITLE		DELEYE 2.1		1 TITLE			Change	e 🔲 Addition
NAME	[		22 NAME					}
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CITY-ST-ZIP			2.4 CH	2.4 City-ST-ZiP				
TITLE		DELET	E 3.1 TITU	E			☐ Change	e Addition
NAME	1		3,2 NAM	AE.	1			ĺ
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TITLE		DELET					Change	Addition
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CITY-ST-ZIP				/-ST-ZIP				ľ
TITLE		DELET					Change	Addition
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CITY-ST-ZIP	1			( - ST - ZIP				
TITLE		DELET					Change	Addition
NAME		_ 5	6.2 NAM		1		onange	
								j
STREET ADDRESS			6.3 S1R	EET ADDR	E92			

14. 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 annual report or suppliemental 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 histee 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.

SOLOVEY

4-27-98

954-370-8148