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CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300063243 (8)

KAYLIN BUSINESS CONSULTANTS, INC.

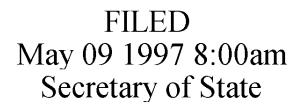
Principal	Place	οf	Bus	inoss

5970 SW 18TH ST **BUITE 229**

Mailing Address

5970 SW 18TH ST

SUITE 229





BOCA RATON	FL 334 33	BOCA RATON FL 33433-7	1197						
					 Date Incorporated or Qualified 09/10/1993 	3a, Date of Last 04/16/1996			
2, Principal Pi	ace of Business	2a, Mailing Address			4, FEI Number	F	Applied For		
21 050	N.W. 15 TH STREET	26 SAMEAS	MEDOI	'E	65-0432318	1	Vot Applicable		
Sulte, Apt.	#, etc. TE_208A	Suite, Apt. #, etc.			5. Certificate of Status Desired	1	Additional Required		
23 BOCA	RATON, FL	City & State			Election Campaign Financing Trust Furid Contribution		0 May Be d to Fees		
Zip 334	86 25 USA	Zip Country 29 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\bigcap \) Yo			
	g, Name and Address of Current I	Registered Agent			10. Name and Address of New Re	gistered Agent			
	XEN, KAYE		11	B1 Name					
	SW 18TH ST		h	B2 Street A	ddress (P.O. Box Number is Not Acceptate	ole)			
	E 22 9		<u> </u>						
800	CA RATON FL 33433		- 1	93					
			Ì	84 City		FL 85 Zip	Code		
11. Pursuant to office or reagent. I as	to the provisions of Sections 607.0502 agistered agent, or both, in the State of mamiliar with, and accept the obligations.	and 607,1508, Florida Statut Florida: Such change was ons of, Section 607,0505, Fl	tos, the ab authorized lorida Statu	ove-named o by the corpo tes.	corporation submits this statement for the poration's board of directors. I hereby acceptation's	ourpose of changing at the appointment a	its registered s registered		
SIGNATURE	Signature, typed or printed name of registered agent.		II.: Registered	Agent signature re	equired when reinstating)	DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC				
TITLE	U CANE	☐ DELETE	1.1 1(1)	E		Change	Addition		
NAME	LINDEN, KAYE		1.2 NAI	AE.					
STREET ADDRESS	5970 SW 18TH ST SUITE 229		1.3 STR	EET ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33433			(-\$T-ZIP	· · · · · · · · · · · · · · · · · · ·				
TITLE		DEFEIE	2.1 TITE	- 1		☐ Change	Addition		
NAME			2.2 NAf	f					
STREET ADDRESS				EET ADDRESS					
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NAME			3.2 NAM						
STREET ADDRESS				EET ADDRESS					
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			5 2 NAM	1					
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NAME			62 NAM						
STREET ADDRESS				EET ADDRESS					
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intermetica	n i ndicated on this enough tenest or our	volgenantal pagual roport is t	truc and a	anurata arid t	ated in Section 119.07(3)(i), Florida Statute that my signature shall have the same legator as required by Chapter 607, Florida S	al official on it mando	ralar aathi tha		