

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

**FILED**  
**Jun 18 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortimer</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P93000066317 (7)**  
 1. Corporation Name  
**K.A.E. HOLDING CORPORATION, INC.**



Principal Place of Business <b>1573 SUNSET DRIVE MIAMI FL 33143</b>	Mailing Address <b>1573 SUNSET DRIVE MIAMI FL 33143-5878</b>
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>09/22/1993</b>	3a. Date of Last Report <b>04/16/1996</b>
21	22	23	24	4. FET Number <b>65-0437359</b>	Applied For <input type="checkbox"/> Not Applicable
25		26		5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
27		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
29		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>GURDJIAN, JACQUES</b> <b>8050 S.W. 157TH STREET</b> <b>MIAMI FL 33157</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City		
				85	Zip Code		
				<b>FL</b>			

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	DELETED		1.1 TITLE		Change	Addition
NAME	JOANNOU, BEN JR.			1.2 NAME			
STREET ADDRESS	9900 S.W. 131ST STREET			1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33157			1.4 CITY-ST-ZIP			
TITLE	V	DELETED		2.1 TITLE		Change	Addition
NAME	JOANNOU, LISA			2.2 NAME			
STREET ADDRESS	14368 S.W. 96TH TERRACE			2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33186			2.4 CITY-ST-ZIP			
TITLE	ST	DELETED		3.1 TITLE		Change	Addition
NAME	GURDJIAN, JACQUES			3.2 NAME			
STREET ADDRESS	8050 S.W. 157TH STREET			3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33157			3.4 CITY-ST-ZIP			
TITLE		DELETED		4.1 TITLE		Change	Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		DELETED		5.1 TITLE		Change	Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		DELETED		6.1 TITLE		Change	Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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 *h... 6/18/97 3x 1105-8281*

CR2E034 (9/96)