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

**FILED** May 27 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P93000066317 (7) K.A.E. HOLDING CORPORATION, INC. Principal Place of Business Mailing Address 1573 SUNSET DRIVE 1573 SUNSET DRIVE MIAMI FL 33143 MIAMI FL 33143 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/22/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0437359 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

10. Name and Address of New Registered Agent □ No 24 25 29 30 9. Name and Address of Current Registered Agent 81 Name **GURDJIAN, JACQUES** 8050 S.W. 157TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33157** 83 84 City Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE. Stonature, typing or printed name of requirement accept and the if about able (NO):E. Registered Apoint signature required whon reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. DELETE Change Addition 1.1 TITLE TITLE JOANNOU, BEN JR. NAME 1.2 NAME 9900 S.W. 131ST STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33157** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 THEF JOANNOU, LISA 2.2 NAME NAME 14368 S.W. 96TH TERRACE 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33186** CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TOLE **GURDJIAN, JACQUES** 3.2 NAME NAME 8050 S.W. 157TH STREET STREET ADDRESS 33 STREET ADDRESS MIAMI FL 33157 CITY-ST-ZIP 3 4. CITY-ST-ZIP Addition DELETE Change TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - 7IP CITY-ST-ZIP TITLE DELETE 5.1 1IILE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIP

DELETE

6.1 7(TLE

6.2 NAME

14. Thereby certify that the information supplied with this filling 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

63 STREET ADDRESS 6.4 CiTY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change

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Addition