

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000073307 (9)

1. Corporation Name

KHR, INC.

Principal Place of Business

4883 ORMEWOOD CT
JACKSONVILLE FL 32207

Mailing Address

4883 ORMEWOOD CT
JACKSONVILLE FL 32207

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

24

Country

29

30

9. Name and Address of Current Registered Agent

ROWAN, KEITH
4883 ORMEWOOD CT
JACKSONVILLE FL 32207

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

Signature typed or printed name of registered agent and their appropriate title

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

TITLE D
NAME ROWAN, KEITH
STREET ADDRESS 4883 ORMEWOOD CT
CITY-ST-ZIP JACKSONVILLE FL 32207

DELETE

11 TITLE

TITLE D
NAME ROWAN, DENISE
STREET ADDRESS 4883 ORMEWOOD CT
CITY-ST-ZIP JACKSONVILLE FL 32207

DELETE

12 NAME

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13 STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

14 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

31 TITLE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

32 NAME

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

33 STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

34 CITY-ST-ZIP

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 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:

Keith H. Rowan, Inc. 3808 S. Federal Hwy. #2001



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/12/1993

4. FEI Number

59-3204606

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

7. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. Yes No

10. Name and Address of New Registered Agent

CR2E034 (1097)