


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

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P 93000076218 (S)
1. Corporation Name
K e's LIMITED CORPORATION.

Principal Place of Business
19 E South West 15th St
Dania FL 33004

Mailing Address
1837 S. STATE RD 7
FT. LAUDERDALE
FL 33317

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21	26	11.3.93	65-0445605	Not Applicable
22	27	5. Certificate of Status Desired	8.75 Additional Fee Required	
23	28	6. Election Campaign Financing	5.00 May Be Added to Fees	
24	29	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	8. Yes	No

9. Name and Address of Current Registered Agent

MAHABIR, PRABHU DATH
1837 S. STATE RD 7
FT. LAUDERDALE FL 33317

10. Name and Address of New Registered Agent

81 Name
MAHABIR, PRABHU DATH
82 Street Address (P.O. Box Number is Not Acceptable)
1837 S. STATE RD 7
83
84 City
FT. LAUDERDALE FL
85 Zip Code
33317

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 reissuing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	1.1 TITLE	1.1 TITLE	Change
NAME	1.2 NAME	1.2 NAME	Addition
STREET ADDRESS	1.3 STREET ADDRESS	1.3 STREET ADDRESS	
CITY-ST-ZIP	1.4 CITY-ST-ZIP	1.4 CITY-ST-ZIP	
TITLE	2.1 TITLE	2.1 TITLE	Change
NAME	2.2 NAME	2.2 NAME	Addition
STREET ADDRESS	2.3 STREET ADDRESS	2.3 STREET ADDRESS	
CITY-ST-ZIP	2.4 CITY-ST-ZIP	2.4 CITY-ST-ZIP	
TITLE	3.1 TITLE	3.1 TITLE	Change
NAME	3.2 NAME	3.2 NAME	Addition
STREET ADDRESS	3.3 STREET ADDRESS	3.3 STREET ADDRESS	
CITY-ST-ZIP	3.4 CITY-ST-ZIP	3.4 CITY-ST-ZIP	
TITLE	4.1 TITLE	4.1 TITLE	Change
NAME	4.2 NAME	4.2 NAME	Addition
STREET ADDRESS	4.3 STREET ADDRESS	4.3 STREET ADDRESS	
CITY-ST-ZIP	4.4 CITY-ST-ZIP	4.4 CITY-ST-ZIP	
TITLE	5.1 TITLE	5.1 TITLE	Change
NAME	5.2 NAME	5.2 NAME	Addition
STREET ADDRESS	5.3 STREET ADDRESS	5.3 STREET ADDRESS	
CITY-ST-ZIP	5.4 CITY-ST-ZIP	5.4 CITY-ST-ZIP	
TITLE	6.1 TITLE	6.1 TITLE	Change
NAME	6.2 NAME	6.2 NAME	Addition
STREET ADDRESS	6.3 STREET ADDRESS	6.3 STREET ADDRESS	
CITY-ST-ZIP	6.4 CITY-ST-ZIP	6.4 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: P. Mahabir PRABHU DATH, MAHABIR 4-8-98

CR2E034 (10/97)