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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

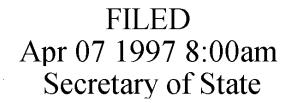
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000077349 (7)

KENWOOD PROPERTIES, INC.



Principal Place of Business 1390 BRICKELL AVE SUITE 230 MIAMI FL 33131	Mailing Address 1390 BRICKELL AVE SUITE 230 MIAMI FL 33131-3322						
		•	3	Date Incorporated or Qualified 11/08/1993	3a. Date 02/26	of Last Re	3port
2. Prinopal Place of Business	2a. Mailing Address		4	i. FEI Number 65-0452398	,	Ap	plied For
21	Suite, Apt. #, etc.	**************************************	5	Certificate of Status Desired		\$8.75 A	Additional
City & State	City & State		6	. Election Campaign Financing	<u></u>	\$5.00	May Be
Zip Country	Z (p)	Country	8	Trust Fund Contribution 3. This corporation has liability fo	r intangible ta		
24 25 9, Name and Address of Curren	29 t Banistered Agent	30		Florida Statutes), Name and Address of New R			
	· ···Aistoian whallt	B1 Na	me	, raile and walless of Hew L	ARISTOLOU VA	-	
PRADO, ANTONIO 1390 BRICKELL AVENUE #230 MIAMI FL 33131				P.O. Box Number is Not Accepte	able)		
		84 Cit	У		FL	85 Zip C	Code
11. Pursuant to the provisions of Sections 607.050, office or registered agent, or both, in the State agent. I am familiar with, and accept the obligations of the State of t	ations of, Section 607.0505, I	thes, the above-har s authorized by the forida Statules.			ept the appoir	nanging its	registered
12. OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	***************************************		****
TIBLE PD	☐ DELETE	1.1 TITLE			_	Change	Addition
PRADO, ANTONIO		1.2 NAME	ļ				
STHEET ACCIDESS 1390 BRICKELL AVE SUITE 2	30	1.3 STREET ADDR	ESS				
GEY ST-7P MIAMI FL		1.4 CITY - ST - ZIP		······································			
TILE VD	DELETE	21 TITLE	ļ			_ Change	Addition
MONALDI, FRANCISCO J.		22 NAME					
STREET ADDRESS: 1390 BRICKELL AVE SUITE 2	30	2 3 STREET ADDR			0.1		
GHY-SI ZIE MIAMI FL TITLE SD	DELETE	2. 4 CITY - ST - ZIP	<u>'</u> -	······		Change	Addition
DOLDO OLTALBIA	☐ Defet	3.1 TITLE	1		L.	า กาดเครีย	L.J MODIDON
ANN BRIGHTH AVE OUTE A	30	3.2 NAME 3.3 STREET ADDR	EGB				
ANIARN PI	~~		1				
C IY-SI-ZIP MIAMI FL	DELETE	3.4. CITY-ST-28 4.1 TITLE				Change	Addition
NAME		4, 2 NAME					
STREET ADDRESS		4.3 STREET ADOR	ESS				ļ
CITY S1-75°		4.4 CITY - ST - ZIP					
TITLE	DELETE	51 TITLE	 			Change	Addition
NAME		52 NAME			_	·	
STREET ADDRESS		5.3 STREET ADDA	ess				
		5.4 CtTY-ST-ZIP					
MILE	DELETE	6.1 TITLE			Γ.	Change	Addition
NAME		6.2 NAME	Ì		_		
STREET ACCIDENS		6.3 STREET ADDR	FSS				
C(17 - S ³ - Z) ⁰		6.4 CITY - ST - ZIP					

14. To 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 accidence that make the same legal effect as if made under oath; that I am an officer or direction of the corporation of this 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 a attachment with an address.

SIGNATURE: