2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

DOCUMENT # P9400008105 1. Entity Name K INVESTMENTS, INC.								Feb 12, 2004 08:00 AM Secretary of State				
			.=			000 WA 150	4					
Principal Place of Business Mailing Address												
P.O. BOX 821831 P.O. BOX 821831 SOUTH FLORIDA FL 33082 SOUTH FLORIDA FL 33082												
2. Principal P	lace of Busine	SS	Mailing Address			\dashv						
Cuito Ama	# =1=	Pr. mb	Suite, Apt. #, etc.					SES SESEN (IBIL)	THEMS MISSING	ME ES CAMBO		
Suite, Apt #, etc				Julie, Apr. #, etc.				MOORE CR2E03	34 (11/0)	3}		
City & State	e	City	City & State			4. F	65-0556282			lied For Applicable		
Zip	Zip Country		Z _I p Co		Coun	5. Certificate of Status Desired \$8.75 Fee Rec			ional			
	and Address of Currer	nt Registere	ed Agent		7. 1	Name and Address of New Registere	d Agent					
						Name						
KHC 322		Street Address			Box Number is Not Acceptable)							
DAVIE FL 33324								· · · · · · · · · · · · · · · · · · ·				
				City	City Zip Code							
						F · · · · · · · · · · · · · · · · ·						
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.												
SIGNATURE .						<u>-</u>						
	Signature, typed o	printed name of registered age	ont and little if app	okcable (NOT	E. Registere	d Agent signature requ	iked when re	einstating) DATI	<u> </u>			
FiLE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State								9. Election Campaign Financing Trust Fund Contribution.	0 ;	\$5.00 Added t	May Be o Fees	
10.		OFFICERS AN	D DIRECTO	DRS	11.		ΑD	DDITIONS/CHANGES TO OFFICERS A				
TITLE	P KHOURY, LARRY			☐ Delete 117		į.			☐ Ch	ลกซูล	Addition	
NAME STREET ADDRESS				3		EET ADDRESS						
CITY - ST - ZIP	}	DALE FL 33330			CITY	CST-ZIP		111000000000000000000000000000000000000				
TITLE NAME	VP NORMA			☐ Delete III				.00.0.00047854 □ Change 02/12/04-80057-011 150.00		Addition Addition		
STREET ADDRESS	KHOURY, NORMA BORESS 3221 SW 117TH AVE					ET ADDRESS						
CITY-ST-ZIP	FT LAUDERDALE FL 33330				cm	(-ST-ZIP					- <u></u>	
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TITLE NAME				☐ Delete	IRT Man	}			∐ Cr	iange	☐ Addition	
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CITY-ST-ZIP						Y-ST-Z3P		,				
12. I hereby indicated of the co-	certify that the d on this repor exporation or th I, or on an atta	information supplied v t or supplemental repo e receiver optrustee er chment will an addres	vith this filing rt is true and npowered to is, with all of	g does not qualify for accurate and that a execute this repor her like empowered	or the exe my signa t as requ t.	emption stated in ature shall have t aired by Chapter	Section he same 607, Flor	119.07(3)(1), Florida Statutes. I further legal effect as if made under oath; tha rida Statutes, and that my name appea	certify that t i am an rs in Block	t the inl officer o k 10 or	formation or director Block_11 if	

FILED