

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 10:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000008997 (6)**

1. Corporation Name

KBS INVESTMENTS, INC.

Principal Place of Business

1498 NW 3RD ST
DEERFIELD BEACH FL 33442

Mailing Address

1498 NW 3RD ST
DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/04/1994

3a. Date of Last Report

4. FEI Number

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

HONIG, GARY D
2500 E HALLANDALE BEACH BLVD
SUITE 707-B
HALLANDALE FL 33009

10. Name and Address of New Registered Agent

81 Name **BAHMAN KHOSHNOOD**
82 Street Address (P.O. Box Number is Not Acceptable)
1498 NW 3RD ST
83 City **DEERFIELD BEACH** FL 85 Zip Code **33442**

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

Bahman Khoshnood

BAHMAN KHOSHNOOD

5/1/95

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **KHOSHNOOD, BEN**
STREET ADDRESS **1498 NW 3RD ST**
CITY ST ZIP **DEERFIELD BEACH FL 33442**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** Change Addition
1.2 NAME **KHOSHNOOD, BAHMAN**
1.3 STREET ADDRESS **1498 NW 3RD ST**
1.4 CITY ST ZIP **DEERFIELD BEACH, FL 33442**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

2.1 TITLE **PST** Change Addition
2.2 NAME **KHOSHNOOD, BAHMAN**
2.3 STREET ADDRESS **1498 NW 3RD ST**
2.4 CITY ST ZIP **DEERFIELD BEACH, FL 33442**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 by an attachment with an address.

SIGNATURE:

Bahman Khoshnood
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BAHMAN KHOSHNOOD

5/1/95 (305) 360-7200