

FILE NOW: FILING FEE AFTER MAY 1 IS \$5.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000026277 (1)

1. Corporation Name

K-100 INCORPORATION



Principal Place of Business

18999 BISCAYNE BLVD
#205
N MIAMI BEACH FL 33180

Mailing Address

2853 STIRLING ROAD
FT LAUDERDALE FL 33312

2. Principal Place of Business

2a. Mailing Address

21 5901 LAKESHORE DRIVE

26 Suite, Apt. #, etc.

22 FT LAUDERDALE, FL

27 Suite, Apt. #, etc.

23 33312 DOWNS

28 City & State

24 Zip

25 Country

29 Zip

30 Country

3. Date Incorporated or Qualified

04/06/1994

3a. Date of Last Report

09/18/1995

4. FEI Number

65-0482028

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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WONG, TIN SUI
18999 BISCAYNE BLVD
#205
N MIAMI BEACH FL 33180

81 Name

CHANG, MARIA

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

2480 West 71 place

83

Hialeah, FL 33016

84 City

FL

85 Zip Code

33016

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 (if not applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

02/2/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME WONG, TIN SUI
STREET ADDRESS 18999 NE 172 TERR
CITY-ST-ZIP N MIAMI BEACH FL 33180

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/2/96

887-6346

Date

Daytime Phone #

CR2E034 (12/95)