## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$226 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

| I. Corporation Name | DOCUMENT # | P94000035211 | (9) |
|---------------------|------------|--------------|-----|
|---------------------|------------|--------------|-----|

KT TECHNOLOGIES & CONSULTING, INC.



| Principal Place   |   | 77   | ing Address         |  |  |   | -   |               |                                 |
|---|---|--|---------------------|--|--|---|---|---------------|---------------------------------|
| HIALEAH FL (  | 33014                                     | Н  | IALEAH FL 33014     |  |  |   | 3. Date incorporated or Qualified 05/09/1994                      |               | of Last Report<br>)1/1995       |
| 2. Principal Pla  | ce of Business                            | h  | Mailing Address     |  |  |   | 4. FEI Number<br>CE_040007C                                       |               | Applied For                     |
| Suite Apt #   | olo                                       | 26   | Suite, Apt. #, etc. |  |  |   | 65-0488276  |               | Not Applicat  \$8.75 Additional |
| 2 Suite Apt #   | , e.c.                                    | 27   | sans, run n, cic.   |  |  |   | 5. Certificate of Status Desired                                  |               | Fee Required                    |
| City & State  |   | (  | Dity & State        |  |  |   | 6. Election Campaign Financing                                    | []            | <b>\$5.00</b> May Be            |
| 3 7.0   | Country                                   | 28   | Zip                 | Cou  | untry  |   | Trust Fund Contribution  8. This corporation has liability for it | nt vec blo la | Added to Fees                   |
| Zip<br>24   | 25  | 29   | ziμ                 | 30   | эни у  |   | Florida Statutes  |               | cunders 199.052.<br>No          |
| :4  | 9. Name and Address of Curren             |  | red Agent           | 130  | Τ.   |   | 10. Name and Address of New Re                                    |               | ent                             |
| 70  |   |  | -                   |  | 81   | Name  |   | T             |                                 |
|   | WNSEND, WENDY L<br>35 W 12 CT             |  |                     |  | 82   | Street Addre  | ess (P.O. Box Number is Not Acceptab                              | le)           |                                 |
|   | NEAH FL 33014                             |  |                     |  |  | Jacot Addit   | Son (   |               |                                 |
|   |   |  |                     |  | 83   |   |   |               |                                 |
|   |   |  |                     |  | 84   | City  |   | FL            | 85 Zip Code                     |
| 12.   | OFFICERS AN                               |  |                     | 13.  |  | at signal are a qual  | d when reastaing) ADDITIONS/CHANGES TO OFFIC                      | CERS AND D    | RECTORS IN 12 Change Addit      |
| TITLE<br>NAME   | PD<br>Krogol, Matthew F                   |  | ☐ DELETE            | •  | IIILE<br>SAME  |   |   | L             | - Salarye Addi                  |
| STREET ADDRESS  | 8810 SW 132ND PL #203                     |  |                     |  |  | ADDRESS   |   |               |                                 |
| CHTY-ST-ZIP   | MIAMI FL 33186                            |  |                     | 140  | DITY -S  | it - ZiP  |   |               |                                 |
|   | ININ NAME IN PROPERTY.                    |  |                     |  |  |   |   |               |                                 |
| TITLE   | VSTD                                      |  | DELFIE              |  | TiTLE  | 1   |   |               | Change Add                      |
|   | vstd<br>Townsend, Wendy L                 |  | DELFTE              | 217  | T:TLE<br>NAME  | ]   |   |               | Change Add                      |
| TITLE   | vstd<br>Townsend, wendy L<br>7735 w 12 CT |  | DELFIE              | 21T<br>22M   | NAME   | ADDRESS   |   |               | Change Add                      |
| TITLE<br>NAME   | TOWNSEND, WENDY L                         |  |                     | 211<br>221<br>235<br>24  | NAME<br>STREET   | ADDRESS<br>SE-ZIP   |   |               |                                 |
| TITLE NAME STREET ADDRESS   | TOWNSEND, WENDY L<br>7735 W 12 CT         |  | DELETE              | 217<br>22N<br>23S<br>24<br>E 311   | NAME<br>STREET<br>CITY - S<br>TITLE  | 1   |   |               | Change Add                      |
| TITLE NAME STREET ADDRESS CITY-ST-ZIF   | TOWNSEND, WENDY L<br>7735 W 12 CT         | i ada calva, a · v   |                     | 217<br>221<br>235<br>24<br>E 311<br>321  | NAME<br>STREET<br>CITY - S<br>TITLE<br>NAME  | ST-ZIP  |   |               |                                 |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS   | TOWNSEND, WENDY L<br>7735 W 12 CT         | · sada cultura a s   |                     | 217<br>22N<br>23S<br>24<br>E 317<br>32N  | NAME<br>STREET<br>CITY - S<br>TITLE<br>NAME<br>STREET  | ST-ZIP  |   |               |                                 |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  | TOWNSEND, WENDY L<br>7735 W 12 CT         |  | DELETE              | 211<br>221<br>235<br>24<br>E 311<br>321<br>333<br>34   | NAME STREET CITY - S TITLE NAME STREET CITY - S  | ST-ZIP  |   |               | Change Addi                     |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE   | TOWNSEND, WENDY L<br>7735 W 12 CT         | and the same of th |                     | 217<br>228<br>235<br>24<br>E 311<br>321<br>333<br>34   | NAME<br>STREET<br>CITY - S<br>TITLE<br>NAME<br>STREET  | ST-ZIP  |   |               | Change Addi                     |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  HAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME   | TOWNSEND, WENDY L<br>7735 W 12 CT         |  | DELETE              | 217<br>228<br>238<br>24<br>E 317<br>328<br>338<br>34<br>E 41   | NAME STREET CITY - S TITLE NAME STREET CITY - S TITLE NAME   | ST-ZIP  ADDHESS ST-ZIP  |   |               | Change Addi                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | TOWNSEND, WENDY L<br>7735 W 12 CT         |  | DELETE              | 217<br>228<br>238<br>24<br>E 317<br>328<br>34<br>E 41<br>42<br>438   | NAME STREET CITY - S TITLE NAME STREET CITY - S TITLE NAME   | ADDRESS   |   |               | Change Addi                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | TOWNSEND, WENDY L<br>7735 W 12 CT         | - Add author of when   | DELETE              | 217<br>228<br>238<br>24<br>E 311<br>321<br>338<br>34<br>E 41<br>42<br>439                                      | NAME STREET CITY - S TITLE NAME CITY - S TITLE NAME NAME STREET  | ADDRESS   |   |               | Change Addi                     |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIF  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  | TOWNSEND, WENDY L<br>7735 W 12 CT         |  | DELETE              | 217<br>228<br>238<br>24<br>E 311<br>328<br>334<br>E 41<br>42<br>438<br>441                                     | NAME STREET CITY - S TITLE NAME CITY - S TATLE NAME STREET CITY - S CITY - S                             | ADDRESS   |   |               | Change Addi                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE   | TOWNSEND, WENDY L<br>7735 W 12 CT         |  | DELETE              | 217<br>228<br>238<br>24<br>5<br>317<br>328<br>34<br>41<br>42<br>438<br>441<br>5                                | NAME  CITY-S  TITLE  NAME  CHY-S  TITLE  NAME  CHY-S  TITLE  NAME  SIREET  CHY-S  NAME                   | ADDRESS   |   |               | Change Addi                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME NAME NAME  | TOWNSEND, WENDY L<br>7735 W 12 CT         |  | DELETE DELETE       | 217<br>228<br>238<br>24<br>317<br>329<br>338<br>34<br>41<br>42<br>431<br>441<br>57<br>57<br>531                | NAME CITY-S TITLE NAME CITY-S TITLE NAME CITY-S TITLE NAME STREET CITY-S TITLE NAME CITY-S CITY-S CITY-S | ADDHESS ST-ZIP  ADDRESS ST-ZIP                                  |   |               | Change Addi                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | TOWNSEND, WENDY L<br>7735 W 12 CT         |  | DELETE              | 217<br>228<br>238<br>24<br>317<br>329<br>338<br>34<br>41<br>42<br>431<br>441<br>57<br>57<br>531                | NAME STREET CITY-: TITLE NAME CITY-: TITLE NAME CITY-: TITLE NAME CITY-: STREET                          | ADDRESS ST-ZIP ADDRESS ST-ZIP I ADDRESS                         |   |               | Change Addi                     |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  | TOWNSEND, WENDY L<br>7735 W 12 CT         |  | DELETE DELETE       | E 217<br>228<br>238<br>24<br>E 317<br>328<br>334<br>441<br>42<br>438<br>441<br>51<br>524<br>533<br>544<br>E 61 | NAME CITY-S TITLE NAME STREET TITLE NAME STREET CITY-S TITLE CITY-S TITLE CITY-S TITLE CITY-S TITLE NAME | ADDRESS ST-ZIP ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP |   |               | Change Addi                     |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE | TOWNSEND, WENDY L<br>7735 W 12 CT         |  | DELETE DELETE       | E 217<br>228<br>238<br>24<br>E 317<br>328<br>334<br>441<br>42<br>438<br>441<br>51<br>524<br>533<br>544<br>E 61 | NAME CITY-S TITLE NAME STREET TITLE NAME STREET CITY-S TITLE CITY-S TITLE CITY-S TITLE CITY-S TITLE NAME | ADDRESS ST-ZIP ADDRESS ST-ZIP I ADDRESS                         |   |               | Change Addi                     |

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 617, Florida Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR