

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

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95 JUN 19 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000038715**
1. Corporation Name
KIP, INC.

Principal Place of Business
**501 SW 5 ST.
FT. LAUD., FL. 33315**

Mailing Address
**501 SW 5 ST
FT. LAUD., FL 33315**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified MAY 23, 1994		3a. Date of Last Report INITIAL	
4. FEI Number 65-0498164		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	
7. This corporation has liability for intangible tax under § 100.039 Florida Statutes ☒ Yes ☐ No			

2. Principal Place of Business 21 FT. LAUDERDALE, FL.	2a. Mailing Address 26 501 SW 5 ST. FT. LAUD., FL 33315
Suite, Apt., etc. 22 501 SW 5 ST.	Suite, Apt., etc. 27 501 SW 5 ST.
City & State 23 FT. LAUDERDALE, FL	City & State 28 FT. LAUD., FL. 33315
Zip 24 33315	Country 25 FLORIDA
Zip 29 33315	Country 30 FLORIDA

9. Name and Address of Current Registered Agent RAMON J. RUJE 250 CATALANA AVE SUITE 506 CORAL GABLES, FL. 33134		10. Name and Address of New Registered Agent 81 Name JEFFREY T. RUNGE 82 Street Address (P.O. Box Number is Not Acceptable) 501 SW 5 ST 83 FT. LAUDERDALE 84 City FT. LAUDERDALE FL 85 Zip Code 33315	
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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 **JEFFREY T. RUNGE** **6/2/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		1. TITLE	P/S/D ☒ Change ☐ Addition
NAME		1.2 NAME	JEFFREY T. RUNGE
STREET ADDRESS		1.3 STREET ADDRESS	501 SW 5 ST.
CITY ST ZIP		1.4 CITY ST ZIP	FT. LAUDERDALE, FL. 33315
TITLE		2.1 TITLE	V/D/T ☒ Change ☐ Addition
NAME		2.2 NAME	ANDREW F. BYRD
STREET ADDRESS		2.3 STREET ADDRESS	501 SW 5 ST
CITY ST ZIP		2.4 CITY ST ZIP	FT. LAUD., FL 33315
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY ST ZIP		3.4 CITY ST ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		6.4 CITY ST ZIP	

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)(k) 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, or on an attachment with an address.

SIGNATURE: **JEFFREY T. RUNGE** **PRESIDENT 6/2/95**