FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

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

FILED
95 APR 21 AM 8:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000040792

1. Corporation Name

Kendall Enterprises,Inc

Principal Place of Business	Mailing Address
9400 S.W. 77 AVE SUITE k4 MIAMI, FLORIDA, 33156	9400 S.W. 77 AVE SUITE K4 MIAMI, FLORIDA 33156

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/27/94
3a. Date of Last Report: 04/20/95

2. Principal Place of Business	2a. Mailing Address
21 9400 SW 77 AVE	26 SAME
Suite, Apt. #, etc. 22 #K4	Suite, Apt. #, etc. 27 SAME
City & State 23 MIAMI, FLORIDA	City & State 28 SAME
Zip 24 33156 Country 25 U.S.A.	Zip 29 SAME Country 30 SAME

4. FEI Number: 65-04954-96 ☐ 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 XX No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

91 Name: ERNESTO FERREIRA
92 Street Address (P.O. Box Number is Not Acceptable): 9400 SW 77 AVE # K4
93 MIAMI.
94 City: FL. 3 FL 95 Zip Code: 3317C

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] 04/06/95
Signature of new registered agent and title if applicable (NOTE: Registered Agent signature required when reinstated) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		11 TITLE	☐ Change ☐ Addition
NAME		12 NAME	PS
STREET ADDRESS		13 STREET ADDRESS	ERNESTO FERREIRA
CITY-ST-ZIP		14 CITY-ST-ZIP	9400 SW 77 AVE #K4 MIAMI,FL 33156
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	VT
STREET ADDRESS		23 STREET ADDRESS	ALDYR ROCHA
CITY-ST-ZIP		24 CITY-ST-ZIP	9400 SW 77AVE #K4
TITLE		31 TITLE	MIAMI, FL 33156
NAME		32 NAME	☐ Change ☐ Addition
STREET ADDRESS		33 STREET ADDRESS	100001465321
CITY-ST-ZIP		34 CITY-ST-ZIP	-04/26/95--01060--020
TITLE		41 TITLE	****200.00 ****200.00
NAME		42 NAME	☐ Change ☐ Addition
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

RC

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)(i), 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: [signature] 03/24/95 (305)6409640
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTING OFFICER OR DIRECTOR — Date — Daytime Phone #