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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 

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P94000055515 (8)

KOSFIELD, INC.

Principal Place of Business

Mailing Address

FILED Apr 29 1998 8:00am Secretary of State



C/O KTG&S REGISTERED AGENT CORPORATION C/O KTG&S REGISTERED AGENT CORPORATION 100 SE 2ND ST.. 28 FLOOR 100 SE 2ND ST., 28 FLOOR MIAM! FL 33131 MIAM! FL 33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/25/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0506753 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23  $\Box$ 28 Trust Fund Contribution Added to Fees Zip  $Z_{\rm IP}$ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30 ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KTG&S REGISTERED AGENT CORPORATION 100 SE 2ND ST. 82 Street Address (P.O. Box Number is Not Acceptable) 28 FLOOR 83 MIAM! FL 33131 84 City Zip Code 85 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, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PDST DELETE TITLE 11 TITLE Change Addition KOSNITZKY, MICHAEL NAME 1.2 NAME 100 SE 2ND ST., 28 FLOOR STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP TITLE DELETE 3 1 TITLE Change Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP TITLE ☐ DELETE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE Change 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 61 TITLE ☐ Addition \_\_\_ Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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 trug and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the Coporation or the receiver or trustee constituents are trusted on the receiver or trustee constituents.