

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Weisman
Secretary of State
CONSUMER CORPORATION, INC.

**APPROVED
AND
FILED**

DOCUMENT # P94000056847 (4)

1. Corporation Name

KEROST X, INC.

APR 21 1995 3:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**7900 MIAMI LAKES DRIVE WEST
MIAMI LAKES FL 33016**

Mailng Address

**7900 MIAMI LAKES DRIVE WEST
MIAMI LAKES FL 33016**

DATE OF REPORT: 08/02/1994

3. Date incorporated or rechartered

08/02/1994

3a. Date of Last Report

N/A

2. Principal Office of Business

21

2a. Mailing Address

26

State: April 1995

State: April 1995

City, State

City, State

23

28

City, State

City, State

24

25

29

30

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

4. FIC Number

69-0509545

Applied For

Not Applicable

5. Certificate of Status Exempt

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be Added to Fees

8. The corporation has liability for intangible taxes under S. 190.001, Florida Statutes

☒

FEIN #22-1039750

9. Name and Address of Current Registered Agent

**BRAFMAN, HOWARD J
7900 MIAMI LAKES DRIVE WEST
MIAMI LAKES FL 33016**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 602 (b)(2) (b)(3) and 602 (b)(4) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent to comply with the provisions of Sections 602 (b)(2) (b)(3) and 602 (b)(4) Florida Statutes. The corporation hereby certifies that the information provided is true and correct and that the registered office or registered agent is in compliance with the provisions of Sections 602 (b)(2) (b)(3) and 602 (b)(4) Florida Statutes.

SIGNATURE

Signature of the person who is authorized to execute this statement on behalf of the corporation

Signature of the person who is authorized to execute this statement on behalf of the corporation

Signature

12.

OFFICERS AND DIRECTORS

NAME

**D
BRAFMAN, HOWARD J
7900 MIAMI LAKES DRIVE WEST
MIAMI LAKES FL 33016**

STREET ADDRESS

CITY, STATE

NAME

**D
KISLAK, JAY I
7900 MIAMI LAKES DRIVE WEST
MIAMI LAKES FL 33016**

STREET ADDRESS

CITY, STATE

NAME

STREET ADDRESS

CITY, STATE

NAME

STREET ADDRESS

CITY, STATE

NAME

STREET ADDRESS

CITY, STATE

NAME

STREET ADDRESS

CITY, STATE

NAME

STREET ADDRESS

CITY, STATE

NAME

STREET ADDRESS

CITY, STATE

NAME

STREET ADDRESS

CITY, STATE

NAME

STREET ADDRESS

CITY, STATE

NAME

STREET ADDRESS

CITY, STATE

13.

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS