

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 20 AM 10:57

DOCUMENT # P94000063683 (4)

1. Corporation Name

KR HOLDINGS, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 08/22/1994 3a. Date of Last Report

4. FEI Number 65-0518205 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 No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Zip 29 Country 30 Country

9. Name and Address of Current Registered Agent

MARCUS, ALAN J
20803 BISCAYNE BLVD.
SUITE 301
N. MIAMI BEACH FL 33180

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 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 typed or printed name of registered agent and the filer)

(If filer, Registered Agent signature required when necessary)

Date

12. OFFICERS AND DIRECTORS

1. TITLE D
2. NAME MARCUS, ALAN J
3. STREET ADDRESS 20803 BISCAYNE BLVD., SUITE 301
4. CITY-ST-ZIP N. MIAMI BEACH FL 33180

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-ST-ZIP

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-ST-ZIP

13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-ST-ZIP

17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY-ST-ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE Change Addition

2. 2. NAME

3. 3. STREET ADDRESS

4. 4. CITY-ST-ZIP

5. 5. TITLE Change Addition

6. 6. NAME

7. 7. STREET ADDRESS

8. 8. CITY-ST-ZIP

9. 9. TITLE Change Addition

10. 10. NAME

11. 11. STREET ADDRESS

12. 12. CITY-ST-ZIP

13. 13. TITLE Change Addition

14. 14. NAME

15. 15. STREET ADDRESS

16. 16. CITY-ST-ZIP

17. 17. TITLE Change Addition

18. 18. NAME

19. 19. STREET ADDRESS

20. 20. CITY-ST-ZIP

21. 21. TITLE Change Addition

22. 22. NAME

23. 23. STREET ADDRESS

24. 24. 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 110.07(3)(b), 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:

YALON VARDA

YALON VARDA

2.14.95

305-961-8481

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

Date