2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000089344

1. Entity Name
KTS FLORIDA CORP. ✓

FILED
Sep 06, 2000 8:00 am
Secretary of State
09-06-2000 90090 042 ***550.00

Principal Place of Business	Mailing Address
2300 PONCE DE LEON CORAL GABLES FL 33134 US	2300 PONCE DE LEON #805 CORAL GABLES FL 33134 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
168, SOUTH EAST 1st Street	c/o MARCOS A. GUERRA CPA
Suite, Apt #, etc.: #600	Suite, Apt #, etc.: 3663 S.W. 8 Street #210
City & State: FL - MIAMI	City & State: MIAMI, Florida
Zip: 33131 Country: USA	Zip: 33135 Country: USA.

4. FEI Number 65-0542011 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MAURER, WILLY 8860 SW 123 CT #K302 MIAMI FL 33186	Name: MARCOS A. GUERRA Street Address (P.O. Box Number is Not Acceptable): 3663 S.W. 8th Street Suite 210 City: MIAMI FL Zip Code: 33135

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE [signature] 8/30/00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11.	OFFICERS AND DIRECTORS		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KURBAN, MITRI 1061 LIEGE WEST MONTREAL, QUEBEC, CANADA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KURBAN, RENEE 1061 LIEGE WEST MONTREAL, QUEBEC, CANADA	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KURBAN, RAJA 1061 LIEGE WEST MONTREAL, QUEBEC, CANADA	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. I hereby certify that the information [illegible] this filing does not qualify for the exemption stated [illegible] Florida Statutes. I further certify that the information indicated on this report or supplemental [illegible] and accurate and that my signature shall have the same legal effect as if made under oath; [illegible] officer or director of the corporation or the receiver [illegible] to execute this report as required by Chapter 607, Florida Statutes; and that my name appears [illegible] or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 08/29/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR