

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 16 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P95000001439 (5)

1. Corporation Name
 KARSON INTERNATIONAL CORP.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
 13701 SW 147TH AVE
 MIAMI FL 33196

Mailing Address
 13701 SW 147TH AVE
 MIAMI FL 33196

3. Date Incorporated or Qualified
 01/06/1995

4. FEI Number
 65-0543884

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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business
 21 18975 SW 256 Street

2a. Mailing Address
 26 PO Box 901149

City & State
 23 MIAMI, FL

City & State
 28 HOMESTEAD, FL

Zip
 24 33031

Country
 25

Zip
 29 33030

Country
 30

9. Name and Address of Current Registered Agent

ROBINSON, WILLIAM A
 13701 SW 147TH AVE
 MIAMI FL 33196

10. Name and Address of New Registered Agent

81 Name
 ROBINSON, WILLIAM A.
 82 Street Address (P.O. Box Number is Not Acceptable)
 18975 SW 256 St.
 83
 84 City
 MIAMI FL 85 Zip Code
 33031

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	ROBINSON, WILLIAM A	13701 SW 147TH AVE	MIAMI FL 33196	<input type="checkbox"/>
D	PALENCIA, ALENXANDER	13701 SW 147TH AVE	MIAMI FL 33196	<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 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: _____

CR2E034 (5/98)