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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** Corporation Name

SIGNATURE:

P95000003106 (8)

CATALINA VOLKENT
GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KANTHER INC.			
Principal Place of Business	Mailing Address		-{
2213 EAST ATLANTIC BLVD. POMPANO BEACH FL 33062-5209	2213 EAST ATLANTIC I POMPANO BEACH FL		
			3. Date incorporated or Qualified 3a. Date of Last Report 01/12/1995
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
1 5202 HE 6th AVE	26 5200 NE 6	AVE	65-0549755   Not Applica \$8,75 Additiona
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27 5F		5. Certificate of Status Desired Fee Required
City & State  3 Ockland FC	City & State  28 Oakland FL		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for intangible tax under s 199.032,
4 33334 25 US.		30 U.S.	Florida Statutes See No. 10. Name and Address of New Registered Agent
g. Name and Address of Curre	nt Hegistered Agent	81 Name 1	
VOLKERT, CATALINA 2213 EAST ATLANTIC BLVD.		82 Street Addr	olkert (atkling) ess (P.O. Box Number is Not Acceptable) NE 6th AV # 67 Oakland
POMPANO BEACH FL 33062-5209		83 F( 3	<del>३</del> ३३३५
		84 City	1 85 Zio Code
dd Discount to the exclusions of Costlena 607 050	2 and 607 1508. Florida Statutes	the above-named cornor	talion submits this statement for the number of changing its registered of
signature Cut alwa Volku	fion 607.0505, Florida Statutes.	by the corporation's boar	ation submits this statement for the purpose of changing its registered of directors. I hereby accept the appointment as registered agent. I are
Signature, typed or printed name of registered age:  12. OFFICERS At	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TOLE PSTD	☐ DELETE	1. 1 TITLE	☐ Change ☐ Additi
NAME VOLKERT, CATALINA		1.2 NAME	
STREET ADDRESS 2213 EAST ATLANTIC BLY		1.3 STREET ADDRESS	
POMPANO BEACH FL 330	F"LDG ETC	1.4 GITY-ST-ZIP 2. 1 TITLE	☐ Change ☐ Additi
Adams	_ Detter	2.1 IIILE 2.2 NAME	
STREET ADDRESS 520% NE 6TH AV 5F	Classond	2.3 STREET ADDRESS	
CITY-ST-ZIP FL 33334		2.4 CITY - ST - ZIP	
TITLE	☐ DELETE	3. 1 TITLE	Change Additi
NAME		3.2 NAME	
STREET ADDRESS		3.3. STREET ADDRESS	
CHY-ST-7IP	☐ DELETE	3.4 CITY-S1-ZIP	Change Addit
TITLE	[1] DETELIC	4. 1 TITLE 4.2 NAME	
NAME		4.3 STREET ADDRESS	
STREFF ADDRESS CHY-ST-ZIP		4.4 CITY - ST - ZIP	
TITLE	☐ DELETE	5. 1 TITLE	☐ Change ☐ Addil
NAME		5.2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY-ST-ZIP		5 4 City - St - ZiP	
TITLE	☐ DELETE	6 1 TITLE	☐ Change ☐ Addit
NAME		6.2 NAME	
1		6.3 STREET ADDRESS	
STREET ADDRESS		6.4 CITY - ST - ZIP	

Catalina Volkert 4/17/96(9521) 7853855