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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000024456 (2)

KSK & ASSOCIATES, INC.

## FILED Apr 03 1997 8:00am Secretary of State



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KOZAK, KEVIN S. 1750 CASTLE ROCK ROAD TAMPA PL 900H2  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City	Country 25 Haves 1 1 25 Haves 1 1 25 Haves 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7ip 29 33365	Country	Florida Statutes	Yes No
TAMPA FL 30642  1. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its rediffector 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, an authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, an authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Section 607 0505, Florida Statules.  IGNATURE    Describe   Note   Describe   Desc		Hedistered Whenr	R1 Name	IV. Name Blo Addiess of New Ne	Sisterior vitalii
diffection registered agent, or both, in the State of Floridal Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered when reinstance)  DATE  2. OF FICENS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. IT IL  WE SHAME  1.2 NAME  1.2 NAME  1.2 NAME  1.2 NAME  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  1.4 CITY-ST-ZIP  1.5 LARIE  1.5	1750 GASTLE ROCK ROAD		82 Street Address		
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, and accept the obligations of, Section 607.0505, Florida Statutes.  IGNATURE    Separate hydroxidation of the plant allow Planticable   NOTE Reposted Agent signature required when reinstance)   DATE			84 City		- 85 Zip Code
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4. I do 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 of changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

131/97

813-717-9046

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