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

P05000027810 (7)

DOCUMENT#	P95000027810	{ /]
1. Corporation Name		1.

K.C. INNOVATIONS, INC.



Principal Place of Business Mailing Address 4210 LINCOLN ST. 4210 LINCOLN ST. HOLLYWOOD FL 33021 HOLLYWOOD FL 33021		T 1885/001 MA 1910. Blitt 8811 9811 8911 8911 1801 1801 1801 1801			
			1		
		dod=		3. Date Incorporated or Qualified 04/07/1995	3a. Date of Last Report 64/67/1995
2. Principal Pla	ace of Business	2a. Mailing Address	/ t2) .	4. FEI Nuniber	Applied For
SA	me	26 474 + HO	llywood Bluc	65-057-2954	Not Applicable
Suite, Apt #	#, etc.	Suite, Apt. #, etc.	77	5. Certificate of Status Desired	\$8.75 Additional
2		27 Suitel	11		Fee Required
City & State)	City & State	d Fl	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28 HOIIYWOO	Country	8. This corporation has liability for	
4	25	29 33021	30 USA		No
<u> </u>	g. Name and Address of C			10. Name and Address of New I	
			81 Name		
AUSTII	N, SCOTT R		82 Street Addre	ess (P.O. Box Number is Not Acceptal	nlei
	E. THIRD AVE.		Street Addre	533 V 101 DON 11(11) DON 101 TON 1000 DIGITAL	
SUITE			83		
	UDERDALE FL 33301		84 City		85 Zip Code
				ation submits this statement for the pu	
SIGNATURE: _	Styrull de typed or proded ned 6 of holy feet		s. Registered Agent sign thromoreuses		4-18-96
12.		SAND DIRECTORS 7. Pres. Delete	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12 Change
THE		J. F. E. T. DETER	1 1 100 5		Charge Addition
AME	CARTER, BARBARA		1.2 NAME		
TREET ADDRESS	4210 LINCOLN ST.	•	13 STREET ADDRESS		
OTY - ST - ZIP TILE	HOLLYWOOD FL 3302		1.4 C-1Y - ST - ZIP 2.1 TITLE		Change Addition
IAME	LISA LUNet	L	2.2 NAME		
STREET ADDRESS	4210 LINCO	IN St.	2.3 STHEET ADDRESS		
) ITY - ST - ZIP	Hollywood	E1 330 21	2.4 Cl*Y - S* - Zl*		
ITLE	101140000	DELETE	3 1 DILF		Change Addition
AME			3 2 NAME		
TREET ADDRESS			3.3 STREET ADDRESS		
ITY - ST - ZiP			3 4 CiTY - ST - ZIP		
ITLE		DELETE	4 1 Tillef		Change Addition
AME			4.2 NAME		
TREET ADDRESS			4.3 STREET ADORESS		
ITY - ST - ZIP			4.4 City St-ZiP		
ITEF		CELETE	5 1 7/165		Change Addition
AME			5.2 NAME		
TREET ADDRESS			5.3 STREET ADDRESS		
HY-SI-ZP			5.4 C(TY-ST-7)P	· · · · · · · · · · · · · · · · · · ·	[] (hanna] Addres
ItLE		□ D€√ETÈ	6 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP	Alf he day the said	mbast with this films is voluntarily form	■ 6.4 CHY+ST+ZIP	or the execution stated in Section 119	Ozgova Finada Contana de des

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 11907 pilits, involved statutes, Furnished and about the information indicated on this armust report or supplemental annual report is true and accurate and that my signature shall have the some logal 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARBARA CARTER 4-18-96

4-18-96 989-1920