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 #
1. Corporation Name

P95000035090 (6)

KB COLLECTIBLES, INC.

					AT 4-4 KAN - AARK BJ - AJAK A J - AJ				
Principal Place of Business Mailing Address							,		
963 N.E. 132 STREET 963 N.E. 132 STREET NORTH MIAMI FL 33161 NORTH MIAMI FL 33161									
				P-27-140 1811 - P88 11		3. Date Incorporated or Qualif 05/04/1995	ied 3a. Date	of Last R	eport
2. Principal Plac	ce of Business	2a. Mailing A	ddress			4. FEI Number 65 - 06	J58		Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Ap	t. #, etc.		der und berdry zu bereicht des behalf zu W. und				Additional
·		27	7			5. Certificate of Status Desired Fee Required			
City & State		 	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
3 Country		28	Zip Cour			Aqued		d to Fees	
241,	25	29	30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No			
	9. Name and Address of Curre			h		10. Name and Address of N	w Registered	Agent	
7		anney dender from a madeler advish for a deliver de a bishika a bishika a bishika a bishika a bishika a bishika		81	Narne				
BOIKO, I	BRUCE M			82	Street Add	ress (P.O. Box Number is Not Acce	eptable)		
	V 117 AVE., SUITE 100								
MIAMI FI	L 33183			83					
				84	City		FL	85 Zi	p Code
11. Pursuant to	the provisions of Sections 607.050	02 and 607.1508, Fl	orida Statutes, th	e above-ı	named corpo	ration submits this statement for th	e nurgose of cha	nging its r	egistered office
or registere familiar with	od agent, or both, in the State of Flor n, and accept the obligations of, Sec	rida. Such change v ction 607.0505, Flor	vas author ize d by ida Statut es	the corp	oration's boa	rd of directors. I hereby accept the	appointment as	registered	Lagent, Lam
SIGNATURE:									
Š	Signature, typod or painted name of registered ager		(NOTE: Re		it sływature recjuire	d when roinstating)	DATE:	0.5.5.5.5	
12.	OFFICERS AND DIRECTORS Delete		DELETE	13.		ADDITIONS/CHANGES TO		DIRECTO	ORS IN 12
TITLE	DEDG MENNETH	LJ	DELTTE	1. 1 TITLE 1.2 NAME			ι	Unange	[] Addition
NAME STREET ADDRESS	Berg, Kenneth 963 N.E. 132 Street			1.3 STREET	ADDRESS				
City - S1 - ZiP	NORTH MIAMI FL 33161			1.4 CITY- S					
TITLE	D	[7]	DELETE	2. 1 TiTLE	1-24		Т	Change	Addition Addition
NAME	BERG, JANET	-		2.2 NAME			-		
STREET ADDRESS	963 N.E. 132 STREET		ŀ	2 3 STREET	ADDRESS				
CITY-ST-7IP	NORTH MIAMI FL 33161			2.4 CITY- S	1-7:P				
TITLE	- Annual Addition of the Management of the Annual A		DELETE	3. 1 T/TLE			Ē	Change	Addition Addition
NAME				3 2 NAME		,			
STREET ADDRESS				3 3. STREE	ADDRESS .				
CITY - ST - ZIP				3.4 CHTY-5					Production of the Control of the Con
TITLE		LJ	DELETE	4. 1 THLE	,		Ļ	Change	Addition .
NAME				4.2 NAME	,				
STREET ADDRESS				4.3 STREET					
CrTY - ST - ZIP			DELETE	4.4 Chiy- S 5. 1 Title		900001	83601	38	[] Addition
TITLE NAME		L.J	area to to the	5.2 NAME		9000011 -05/23/96	010100t	J9 ~~~~	LI FROMOSI
STREET ADDRESS				5.3 STREET	1	***200.00			
City-St-ZiP				5.4 CITY-5					
TITLE	· · · · · · · · · · · · · · · · · · ·	Π	DELETE	6. 1 TITLE		okum na akamuda day a rama na maka ma mandan A ma Ana a ma a makada A na Ana ak a a MAMA kama k mbandha	1617	Change	Addition
NAME				6.2 NAME		ממח	$\mathcal{I}_{\mathcal{I}_{\mathcal{I}}}$ $\mathcal{M}^{\mathcal{M}^{*}}$	-	
STREET ADDRESS				6.3 STREET	ADDRESS	A.	ノメタ(P ^I グ ^X		
CITY+ST-ZIP				6 4 CITY - 9	ST-ZIP		<i>J</i>		
4.4 Late to see to	and the state of t	A contract to the first of the contract of the			Pc Pc	ومراكب وأراك والمراف والمرافي والمرافي والمرافية والمراف	A A O O DOMESTIC FOR	Calle Ottober	taa 1 de alean

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 119.07(3)(k), 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylime Phone #