

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000040563 (5)**

1. Corporation Name
K & G PROPERTIES, INC.



Principal Place of Business: **1996 SW FIRST STREET MIAMI FL 33135**
Mailing Address: **1996 SW FIRST STREET MIAMI FL 33135**

2. Principal Place of Business
21 **8525 SW 44 Street**
Suite, Apt. #, etc.
22
City & State
23 **Miami, Florida**
Zip Country
24 **33155** 25
2a. Mailing Address
26 **8525 SW 44 Street**
Suite, Apt. #, etc.
27
City & State
28 **Miami, Florida**
Zip Country
29 **33155** 30

3. Date Incorporated or Qualified: **05/23/1995**
3a. Date of Last Report
4. FET Number: **65-04421755** Applied For Not Applicable
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 has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**CORBAN, JOSE A
5033 NW 7TH STREET STE 506
MIAMI FL 33126**

10. Name and Address of New Registered Agent
81 Name: **CORBAN, JOSE**
82 Street Address (P.O. Box Number is Not Acceptable): **8525 SW 44 Street**
83
84 City: **Miami** FL 85 Zip Code: **33155**

11. Pursuant to the provisions of Sections 607.0507 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 607.0506, Florida Statutes.

SIGNATURE: **Jose Corban** DATE: **2/22/96**

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	CORBAN, JOSE S	
STREET ADDRESS	5033 NW 7TH STREET STE 506	
CITY-ST-ZIP	MIAMI FL 33126	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GONZALEZ, ALFREDO	
STREET ADDRESS	5033 NW 7TH STREET STE 506	
CITY-ST-ZIP	MIAMI FL 33126	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D/P/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	CORBAN, JOSE S.	
13 STREET ADDRESS	8525 SW 44 Street	
14 CITY-ST-ZIP	Miami, Florida 33155	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE	VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	RODRIGUEZ DE KORBAN, RUDELINA	
23 STREET ADDRESS	8525 SW 44 Street	
24 CITY-ST-ZIP	Miami, Florida 33155	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this form 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: **Jose Corban, President** DATE: **2/22/96**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)