FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 05 1998 8:00am Secretary of State

	1998	DIVISION OF COF	J Secretary of State					
DOCUMENT # P95000053026 (7) ROGER KAHN INCORPORATED					. (mathwal ilm jacal mills mark! mell sakk ma	41 81188 87591 88 118 82 8	t s s uu 1241	
Principal Place of Business Mailing Address					3 SENTING ITM SECTION WILLIAMS WELL DESTRICTED	#1 #11## 1L611 #0 1 5 66#	10 0111 1BBC	
1810 NE 118TH ROAD 1810 NE 118TH ROAD								
N. MIAMI FL 3	33181	N. MIAMI FL 33181			DO NOT WRITE IN T	THIS SPACE		
					3. Date Incorporated or Qualified			1
					07/10/1995]
	lace of Business	2a. Mailing Address			4. FEI Number		oplied For	-
Suite, Apt.					65-0588440	£9.75 /	ot Applicable	1
22		27			5. Certificate of Status Desired	Fee Re		1
City & State	ө	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00		}
Zip				buntry 8. This corporation owes or has paid the curre			Added to Fees	
24	25	2930	T .		Personal Property Tax due June 30.] No	1
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registe	ered Agent]
MC	CRAY-KAHN, ARMELLA		81	Name				}
1810 NE 118TH ROAD			82	82 Street Address (P.O. Box Number is Not, Acceptable)				1
] N. I	MIAMI FL 33181		83		-	· -		┨
						· · · · · · · · · · · · · · · · · · ·		_
			84	City	•	FL 85 Zip (Code	-
11. Pursuant office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Stat	02 and 607.1508, Florida Statutes, e of Florida. Such change was auth	the above	-named corporat	poration submits this statement for the purpo- tion's board of directors. I hereby accept the		s registered registered	1
	m familiar with, and accept the obliq	gations of, Section 607.0505, Florida	a Statutes	•	· · · ·	•	-	
SIGNATURE	Signature, typed or printed name of registered ap	pent and title if applicable. '(NOTE: Re	egistered Age	nt signatura requir	red when reinstating) Do	ATE		-
12.	OFFICERS AT	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS			9/2
TITLE	-		1.1 TITLE		· ·	Change	Addition	Ē
NAME	MCCRAY-KAHN, ARMELLA		1.2 NAME					E034
STREET ADDRESS	1810 NE 118TH ROAD N. MIAMI FL 33181		1.3 STREET AD: 1.4 CITY-ST-2					75
CITY-ST-ZIP			2.1 TITLE	1-ZIP		Change	Addition	문
NAME	KAHN, ROGER E	_	2.2 NAME	1				l
STREET ADDRESS	1810 NE 118TH ROAD		2.3 STREET ADDRESS			·		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		·	·		1
TITLE			3.1 TITLE			Change	Addition	
NAME			3.2 NAME 3.3 STREET ADDRESS					1
STREET ADDRESS				· ·				
CITY-ST-ZIP TITLE	 		3.4. CITY-S 4,1 TITLE	1-21		Change	Addition	1
NAME		_	4. 2 NAME			_ ,		
STREET ADDRESS			4.3 STREET	ADDRESS				İ
CITY - ST - ZIP			4.4 CITY-ST	r-ZIP				J
TITLE		☐ DELETE	5.1 TITLE			Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	i				1
CITY-ST-ZIP TITLE		5.4 (DELFTE 6.11		1-ZIP		Change	Addition	1
NAME		ت محدید	6.1 TITLE 6.2 NAME	İ		onange		
STREET ADDRESS			6 3 STREET	ADDRESS				1
CITY - ST - ZIP			6.4 CITY - ST	1				_
	certify that the information supplied	with this filing does not qualify for th			Section 119.07(3)(i), Florida Statutes. I furth	er certify that the	Information	1

14. I 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 cath; that I am an officer or director of the corporation or the receiver of truther empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attackty ent with an address.

SIGNATURE:

THE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/3/198

Daytime Phone # 02517