


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

112

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Morham</b> Secretary of State DIVISION OF CORPORATIONS
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S7 JUL 16 AM 11:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P95000057482  
1. Corporation Name

**Kenlee, Inc.**

Principal Place of Business Mailing Address

9350 S. Dixie Highway  
Suite 1220  
Miami, Florida 33156

3. Date Incorporated or Qualified July 25, 1995 3a. Date of Last Report 5/1/96

2. Principal Place of Business	2a. Mailing Address	4. FEI Number X 65-0595309	Applied For Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
23 Zip	28 Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 Country	29 Country		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Blanca Santos  
9350 S. Dixie Highway  
Suite 1220  
Miami, Florida 33156

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.

SIGNATURE X Blanca Santos Blanca Santos 4/28/97  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D/p <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rosen, Kenneth	1.2 NAME	000002240740
STREET ADDRESS	9000 S.W. 87th Court, Ste 202	1.3 STREET ADDRESS	-07/17/97--01092--010
CITY-ST-ZIP	Miami, Florida 33176	1.4 CITY-ST-ZIP	****165.00 ****165.00
TITLE	D/S/T <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Santos, Blanca	2.2 NAME	
STREET ADDRESS	9350 S. Dixie Highway, #1220	2.3 STREET ADDRESS	
CITY-ST-ZIP	Miami, Florida 33156	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 if changed, or on an attachment with an address.

SIGNATURE: X Blanca Santos Blanca Santos 4/28/97 aw

CR2E034 (9/96)

2/2

**KENLEE, INC.  
9350 SOUTH DIXIE HIGHWAY  
SUITE 1220  
MIAMI, FL 33156  
(305)670-3405**

July 9, 1997

Annual Reports Filings  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

ATTN: REINSTATEMENTS

**RE: KENLEE, INC. - ANNUAL REPORT FILING - FEI #65-0595309**

Enclosed herewith find copy of our Annual report (with an original signature) filed on April 28, 1997. As I was doing my bank reconciliation I noticed that the check had not been paid, I called your office and was advised to send a copy of the report filed with a new check. I have placed a stop payment of the previous check (copy enclosed) and am issuing a new one (enclosed).

Should you have any questions regarding the above, please feel free to contact me.

Sincerely,



Blanca Santos  
Secretary

/s

Enclosures