**FILED** FILE NOW: FILING FEE AFTER MAY 1 IS \$220,00 **PROFIT** FLORIDA DEPARTMENT OF STATE May 14 1997 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS **XXXX** 1997 DOCUMENT # P95000072087 (6) 1. Corporation Name KR50, INC.
Principal Place of Business Mailing Address 3a. Date of Last Report 3. Date Incorporated or Qualified 326 - 176TH AVENUE CIRCLE 12/31/95 REDINGTON SHORES, FL 33708 10/10/95 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0616803 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Added to Fees Trust Fund Contribution Zip Country Zip Country 8. This corporation has liability for intengible tax under \$ 199.032, 24 X Yes Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) Moore, Charles G., Esq. 83 5530 First Avenue North --01012--080 St. Petersburg, FL 33710 -05/27/97 Zio Code City \*\*\*165.00 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Floride 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 Floride. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIG NATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. TO OFFICERS AND DIRECTORS 1.1 TITLE DELETE Change NAME 1.2 NAME Reiss, Kenneth I STREET ADDRESS 1.3 STREET ADDRESS 326 - 176 Av. Redington Sh FL 33708 CITY -ST -ZIP 1.4 CITY -ST -ZIP TITLE 2.1 TITLE DELETE Addition NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY -ST -ZIP 2.4 CITY - ST - ZIP TITLE 3.1 TITLE DELETE Addition Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CITY - ST - ZIP TITLE 4.1 TITLE DELETE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY -ST -ZIP 4.4 CITY -ST - ZIP TITLE 8.1 TITLE DELETE NAME **6.2 NAME** STREET ADDRESS 6.9 STREET ADDRESS CITY -ST - ZIP 8.4 CITY -ST - ZIP TITLE 6.1 TITLE DELETE Change Addition NAME 6.2 NAME STREET ADDRESS 6.9 STREET ADDRESS CITY -ST - ZIP 6.4 CITY - ST - ZIP 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 118.07(5)(k), Floride Statutes, [further cartify 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 path; that I am an officer or director of the corporation or the receiver or truetee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. Kens SIGNATURE: Francth Kenneth I. <u>(813) 391-5255</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR