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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

DOCUMENT # P95000076294 (4)

K & H GROUP, INC.

	ice of Business	Mailing Address					ODILL HOBER DI	( <b>18</b> 11 <b>019 191</b> 51	9101 1881
394 ORTIZ AVE	394 ORTIZ AVENUE								
FORT MYERS FL 33905		FORT MYERS FL 33905-3614							
U\$		US				3. Date Incorporated or Qualified 10/05/1995		e of Last R	eport
2. Principal f	Place of Business	2a. Mailing Address	·			4. FEI Number	<del></del>	Ap	plied For
1]		26				65-0611249			t Applicab
Suite, Apt	t #, etc.	Suite, Apt. #, etc	<b>).</b>			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & Sta	ate	City & State				6. Election Campaign Financing	······································	\$5.00	May Be
		28				Trust Fund Contribution		Added	
Zip	Country	Zip		untry		8. This corporation has flability for Ir			199.032,
1	25	29	30		ш.ч		Yes 🗌		····
	9. Name and Address of Cu			81	Name	10. Name and Address of New Reg	istered A	gent	
	E LAW FIRM OF LAWRENCE	SPIEGEL CHRID			Name				
343 ALMERIA AVENUE				82	Street Addr	ress (P.O. Box Number is Not Acceptable	e)		
COF	RAL GABLES FL 33134			83				······································	
									_
			!	84	City		FL	85 Zip (	Code
1. Pursuant	it to the provisions of Sections 607	0502 and 607.1508, Florida S	Statutes, the a	bove	-named corp	poration submits this statement for the prition's board of directors. I hereby accep	urpose of c	hanging it	s registere
office or agent 1 :	registered agent, or both, in the S am familiar with, and accept the c	state of Florida. Such change to obtigations of Section 607.050	was authorize 35. Florida Stal	id by itutes	the corporat	tion's board of directors. I hereby accept	t the appoi	intment as	registered
IGNATURE									
IICHAN FOISE	Slig about Typed or printed name of registors	d agent and title if applicable.	(NOTE: Registere	o Ager	nt signature requir	red when reinstating)	DATE		
2.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
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SIGNATURE:

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Secretary of State

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