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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000011593 (6)

KÖSOY INVESTMENTS, INC.

STREET ADDRESS

CITY-ST-ZIP

FILED May 05 1997 8:00am Secretary of State

								(8
Principal Plac	ce of Business	Mailing Address						(B 114) (BB1
303 ROYAL POINCIANA PLAZA PALM BEACH FL 33480		303 ROYAL POINCIANA PLAZA > PALM BEACH FL 33480-4018						
A B b b c c c c c c c c c c					3. Date Incorporated or 02/06/1996	Qualified 3a.	Date of Last R	leport
21 209	Place of Business Phipps Plaze	26. Mailing Address 26. 209 Phi	P25 P1	1 2e	4. FEI Number 65-66408	361		oplied For ot Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status D	esired	\$8.75 Fee Re	Additional equired
City & Stat 23	de	City & State			6. Election Campaign Fit Trust Fund Contribution	·		May Be to Fees
Zip	Country	Ζφ	Oountry		8. This corporation has I			199.032,
24	25 Name and Address of Current	Posistared Agent	30		Florida Statutes		□ No	
9, Name and Address of Current Registered Agent HADDIC I VAIDA 1 81 Name >					10. Name and Address of New Registered Agent			
	RRIS, LYNDA J			<i>1</i>		soy		
222 LAKEVIEW AVENUE SUITE 1400			82	Street Addre	ss (P.O. Box Number is No	Acceptable)	- \	
W PALM BEACH FL 33401			83		1-1-11/26 3	1 10 2	<u> </u>	
			84	City 🔿			OF Zin	Code c
				~ 2	olm Bes		L 32	44 200
11. Pursuant office or i	to the provisions of Sections E07.0502 registered agent, or both, in the State of	and 607 1508, Florida Statute If Florida: Such chance was a	es, the above- uthorized by t	named corpo the corporatio	ration submits this stateme	nt for the purpose reby accept the ar	of changing it	s registered
agent. I a	registered agent, or both, in the State of am familiar with, and accept the obligat	ions of Section 607.0505, Flo	rida Statutes.			en, desept the ep	· pomilinom do	709.010704
SIGNATURE	Signatur year uniprodularit y registered agent	The state of the s						
12.	OFFICERS AND		: Registered Agent	signature required	ADDITIONS/CHANGES	TO OFFICERS AN	ID DIRECTOR	IS IN 12
TITLE	PSTD	DELETE	1.1 TITLE		110011101010111111000	10 0111021074	L ehange	Addition
NAME	KOSOY, A D		1.2 NAME			_		
STREET ADDRESS	383 ROYAL POINCIANA PLAZA		1.3 STREET A	DDRESS 3	ag Phipps	D19.54		
CITY-ST-ZIP	PALM BEACH FL 33480		14 CITY-SY-					
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NAME			2.5 NVWE					
STREET ADDRESS			23 STREET A					
CITY-ST-ZIP TITLE		DELETE	2 4 CITY-ST	- ZIP			Chann	Addition
NAME		C Differ	3.1 TITLE 3.2 NAME				☐ Change	Addition
STREET ADDRESS			3.2 NAME	nneess				
CITY-ST-ZIP			3.4. CITY - ST					
TITLE		DELETE	4.1 TITLE				Change	Addition
NAME	•		4. P NAME					
STREET ADDRESS			4.3 STREET A	DORESS				
CITY-ST-ZIP			4.4 CITY - ST-	202				
TITLE		☐ DELETE	5.1 THILE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET A					
CITY-ST-ZIP		DELETE	5.4 CITY - S1 -	ZIP				A state
TITLE		DELETE	6.1 TITLE				Change	L_] Addition
NAME			6.2 NAME					

6.3 STREET ADDRESS

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 eath; 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.