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 # P96000016791 (1)

KS MANAGEMENT GROUP INC.

FILED Mar 12 1997 8:00am Secretary of State

Principal Place		Mailing Address 2424 N FEDERAL WHY #316	4	
BOCA RATON		BOCA RATON FL 33431-778		3. Date Incorporated or Qualified Sa. Date of Last Report
	lace of Business	2a. Mailing Address	^	02/23/1996 4. FEI Number Applied For
	8 Collins Ave	26 6538 Collin	s five	650 657473 Not Applicable
Suite, Apt	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired See Required
City & State		City & State Beach	FI	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,
24 33491	6 25 DADE	29 33496 3	DADE	Florida Statutes Yes No
	g. Name and Address of Current F	tegistered Agent		10. Name and Address of New Registered Agent
)TMAN, SUSAN J		81 Name	OWEN KOFF
2424 N DEDERAL WHY #314 82 Street Address (P.O. Box Number is Not Acceptable)				
⊸80 €	CA RATON FE 33431			538 COllins Ave
j			63	
1			84 City	ami Beach FL 85 Zip Code 6
	1 Carling CO7 05 00	and CO7 1500. Elected Clash dee	mic	
office or r	egistered agent, or both, in the State of	Florida, Such change was au	thorized by the cor	d corporation submits this statement for the purpose of changing its registered irporation's board of directors. I hereby accept the appointment as registered
agent La	ni tymiar with, and accept the obligation	ons of, Section 607.0505, Flori	da Statutes.	_
SIGNATURE	Signature, typed or µ nited name of registured agont a	and the diagraticable (NOTE	Hagistered Agent signatur	re required when reinstating) DATE
12.	OFFICERS AND C		13.	
1HLF	D	☐ DELETE	1.1 TITLE	Charles Addition
NAME	KOFF, ERIC		1.2 NAME	TEVIC ROPE
STREET ADDRESS	251 W DEKALD PIKE		1.3 STREET ADDRESS	2861 N. OAKLAND FOREST Dr. # 306
CHY-ST-ZIP	KING OF PRUSSIA PA 19406		1.4 CITY-ST-ZIP	OAKLAND PARK FL 33309
THE	D	☐ DELETE	2.1 TITLE	Change Addition
NAME:	SINGER, DAVID		2.2 NAME	DAVID Singer 2425 NW yests 51. #202 Bldg. 14
STREET ADDRESS	2478 NW SAVIER #3		2.3 STREET ADDRESS	0
CiTY - S1 - ZiP	PORTLAND OR 97210	- In the second	2.4 CITY-ST-ZIP	FOR LAUDER DAUE, FI 33309
THLE	D D	[]] DELETE	3.1 TITLE	Change Addition
NAME	KOFF, OWEN 1144 SEAGULL LANE		3.2 NAME	GUSF , OWEN WAY
STREET ADDRESS	CHERRY HILL NJ 08003		3.3 STREET ADDRESS	BXA RATON FL 33496
CHY-ST ZIP TITLE	CHENNI HILL NJ 00003	DELETE	3.4. CITY-ST-ZIP	Change Addition
NAME		ال المدداد	4.1 TITLE 4.2 Name	Li change Li Addition
STHEET ADDRESS			4.2 NAME 4.3 STREET ADDRESS	
CHY-ST-ZIP			4.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·
TILE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
C(1Y-S1-2)P			5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			62 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:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-97

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