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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000017099

1. Corporation Name

K.C.G. INTERNATIONAL LTD., INC.

FILED
Apr 29, 1999 8:00 am
Secretary of State
04-29-1999 90253 002 ***150.00

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2. Principa P	lace of Business	2a. Mailing Ac	dress			11 0	),	4. FEI Nui				ļ	App ied	
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Zip	Country	Zip			Country		7	8. This cc	rporation or	wes the cu	rrent year Ir	ntangible		
24	25	29 14 7	303	30	(	SA		Person	ai Property	Tax.		Yes	<u>[</u> 9K	10
	9. Name and Add ess of Curre	nt Registered Ager	nt					10. Name	and Addre	ss of New	Registere	d Agent		
					81	Name								
1	FE, LARRY				82	Stroot A	Addros	ss (P.O. Box	Number is	Not Accer	ntable)			
200	- <b>a john kno</b> x road				04	Sileer	40 JI 65	55 (F.O. BOX	(Antitine) 19	MOI ACCEL	itable/			
TALL	AHASSEE FL 32303-6443				83	3								
1					84	City					F	85 Zi	ip Code	i
44 Pureus at	to the provisions of Sections 607.05	02 and 607 1508 FI	orida Stat	ures th	ne abov	/e-named o	nogroo	ration submit	this state	ment for th	e purpose (	of changing	its rogi	stered_
l office or r	egistered agent, or both, in the State	e o Florida. Such.ch	ange was	: ¿ uthor	rized by	y the corpo	ration'	's board of d	irectors: I h	ereby acc	ept the app	ointment as	registe	red -
agent. I a	m familiar with, and accept the oblig	ations of, Section bu	17.U5U5, F	ic noa s	Statute	S.								
SIGNATURE	Signature, typed or printed har ie of registered age	ont and title if applicable	INO	Ti · Regis	stered And	ent signature re	anu zed w	when reinstating)			DATE			
12.		NC DIRECTORS	(140		13.	sint signature re			NS/CHAN	GES TO C	FFICERS /	ND DIREC	FORS	IN 12
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14. Thereby 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 contributes 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

UILE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR