FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1997**	(seal)	FLORIDA DEPARTMENT OF STATE **Sandra B. Mortham** Secretary of State DIVISION OF CORPORATIONS

FILED
May 14 1997 8:00am
Secretary of State

DOCUMENT # **P96000024183 (1)**

1. Corporation Name

K.E.G. PROPERTIES, INC.

Principal Place of Business	Mailing Address
1380 SW 82ND TERRACE APT 724 PLANTATION FL 33324	1380 SW 82ND TERRACE APT 724 PLANTATION FL 33324-3240

3. Date Incorporated or Qualified **03/14/1996**	3a. Date of Last Report

2. Principal Place of Business	2a. Mailing Address	4. FEI Number **65-0651318**	Applied For / Not Applicable
21 *4702 ALPINE ROAD*	26 *4702 ALPINE ROAD*	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
Suite, Apt #, etc. 22	Suite, Apt #, etc. 27	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
City & State 23 *LAND O'LAKES FL*	City & State 28 *LAND O'LAKES FL*	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	
Zip 24 *34639* / Country 25	Zip 29 *34639* / Country 30		

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PHILLIPS, MARILYN R 25206 SR 54 LAND O'LAKES FL 34639	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City ___ FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D		☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	BERENBERG, MARIO F		1.2 NAME		
STREET ADDRESS	1380 SW 82ND TERRACE APT 724		1.3 STREET ADDRESS		*4800 S. WESTSHORE BLVD., APT 506*
CITY-ST-ZIP	PLANTATION FL 33324		1.4 CITY-ST-ZIP		*TAMPA, FL 33611*
TITLE D		☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	PHILLIPS, CHRISTOPHER D		2.2 NAME		
STREET ADDRESS	10837 NW 40TH ST		2.3 STREET ADDRESS		*4702 ALPINE ROAD*
CITY-ST-ZIP	SUNRISE FL 33351		2.4 CITY-ST-ZIP		*LAND O'LAKES, FL 34639*
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

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: *M F Bou...* 4/23/97 (813)273-3340
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

0264401