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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 11 1997 8:00am

Secretary of State

Daytime Frienc #

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000037330 (3)

KAT-N-D	IL, INC.				
Principal Prace of Business 7289 NORTHWEST 36TH STREET MIAMI FL 33166		Mailing Address 7289 NORTHWEST 36TH S' MIAMI FL 33168-6702	TREET		KAIN 1860E IMBO IMIM BENT KBUT
				3. Date Incorporated or Qualified 3a. 04/30/1996	Date of Last Report
2. Principal Pki 21	ace of Business	2a. Mailing Address 26		4. FEI Number 65-0(6.338)	Applied For Not Applicable
Suite, Apt ≢	#, etc.	Suite, Apt. #. etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
3		28	······	Trust Fund Contribution	Added to Fees
Ζφ 24	Country 25	Ζφ 29	Cc ry	8. This corporation has liability for intang Florida Statutes	
<u></u>	9. Name and Address of Current I		30	10. Name and Address of New Register	
AME 343	RILAWYER CHARTERED ALMERIA AVENUE		Name F	RANK C. BARR ress (P.O. Box Number is Not Acceptable)	050
COR	ALMERIA AVENUE VAL GABLES FL 93134		" 738		"Street
			4 City	0. ^	85 Zip Code
Pursuant te	o the provisions of Sections 607.0502	and 607.1508, Florida Statute	is the a ove-named corr	poration submits this statement for the purpos	e of changing its registered
office or re agent if an	gistered agent, or both, in the State of infamiliar with and accept the obligation	Florida Such change was a ons of, Section 607.0505, Flo	uthorize by the corpora	tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE .	Kleep (13.	u m		× 1	18/97
	Signalus Typed or praised manie of registered again a OFFICERS AND I	rid to cit applicable [NOTE	Registere Agent signature requi	red when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TOLE	PTD	DELETE	1.1 TI E	ADDITIONS/OFFAINGES TO OFFICE IS	Change Addition
NAMI	BARROSO, FRANK C		1.2 N/ ME		
STREET ADDRESS	7289 NORTHWEST 36TH STREE	T	1.3 STEET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33166		1.4 CI Y-ST-ZIP		
TITLE	VSD	DELETE	21 TITLE		Change Addition
NAMI	BAROSSO, LINA I	_	2.2 NAME		
STREET ADDRESS	7289 NORTHWEST 36TH STREE	:1	2.3 STREET ADDRESS		
DiTY-St ZiP	MIAMI FL 33168	T seess	2. 4 C(TY - ST - Z(P		Change Addition
Tillif		DELETE	3.1 TITLE		Change Addition
NAME CONTRACTOR SECTION			3.2 NAME		
STREET ADDRESS CGY+ST-ZIP			3.3 STREET ADDRESS 3.4. CITY-ST-2IP		
THEF	4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	DELETE	4.1 Tifle		☐ Change ☐ Addition
NAME		 ···	4. 2 NAME		
STREET ADEL6:55			4.3 STREET ADDRESS		
CITY - ST - ZIP		The same and the s	4.4 CITY+ST-ZIP		
TIILE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CiTY - ST - ZiP		L I DELETE	5 4 CITY - ST - ZIP		Change Addition
THE		∟ Direit	61 TITLE		CT CHOURE CT VOGITION
NAME CTALL A PROPERTY			6.2 NAME 6.3 STREET ADDRESS		
STREET ADDRESS			6.3 STREET ADDRESS		
14 du hereb	by certify that the information supplied in	with this filing does not qualif	v for the exemption state	d in Section 119.07(3)(i), Florida Stalutes. I fu	rther certify that the
Information	n indicated on this annual report or sup ficer or director of the corporation or the n Block 12 or Block 13 if changed, or c	oplemental annual report is tr se receiver or trustee empowe	ue and accurate and that ered to execute this repo	it my signature shall have the same legal effe- int as required by Chapter 607, Florida Statute	ot as if made under eath; that is; and that my name
G1956 5 II	A			1010-	