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FILED
Jan 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000054025 (7)

1. Corporation Name

KIVA, INC.



Principal Place of Business

Mailing Address

2640 GOLDEN GATE PARKWAY
SUITE 315
NAPLES FL 33942-3203

2640 GOLDEN GATE PARKWAY
SUITE 315
NAPLES FL 33942-3203

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 13356 ROSEWOOD LANE
Suite, Apt. #, etc.

22 City & State
23 NAPLES, FLORIDA

24 34119 Country
25 COLLIER

26 13356 ROSEWOOD LANE
Suite, Apt. #, etc.

27 City & State
28 NAPLES, FLORIDA

29 34119 Country
30 COLLIER

3. Date Incorporated or Qualified

06/21/1996

4. FEI Number

65-0686741

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

Yes No

10. Name and Address of New Registered Agent

SIKET, ANDREW G
2640 GOLDEN GATE PARKWAY
SUITE 315
NAPLES FL 33942-3203

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 13356 ROSEWOOD LANE

84 City

NAPLES

FL

85 Zip Code

34119

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 607.0509, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/17/98

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
D'JAMOOS, JOSEPH E
13356 ROSEWOOD LANE
NAPLES FL 33999

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

14. I 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 as 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

Signature

1/17/98 941-074-1154

CR2E034 (10/97)