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 # P96000075836 (2)

KRESTY ENTERPRISES, INC.

Principal Place of Business	

Mailing Address

4000 KM/ 4 AVE

FILED May 07 1997 8:00am Secretary of State



BOCA RATON		BOCA RATON FL 33431-47	727				
					3. Date Incorporated or Qualified 09/10/1996	3a. Date of	Last Report
2. Principal Pi	iace of Business	2a. Mailing Address			4. FEI Number	1	Applied For
21 Ado 5	5 Federal Hwy	26			65-069286	(Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	┌ \$8	3.75 Additional Fee Required
City & State	fon Beh. FL.	City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be
Zip 24 334?	Country	7 (p	Count	ry	8. This corporation has liability for Florida Statutes	gtangible tax u	
	g. Name and Address of Current				10. Name and Address of New Re	gistered Agent	t
KRE	STY, DANIEL		8	1 Name			
	B NW 4 AVE		ĺΞ	2 Street	Address (P.O. Box Number is Not Acceptate	lo)	
	CA RATON FL 33431			3	nddiess (1.0. box Ndiffber is Not Acceptat		
İ			L	4 City		los.	7 Code
				1 7		FL 85	'
11. Pursuant t office or re agent. I ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	and 607.1508, Florida Statuto I Florida Such change was a ons of, Section 607.0505, Flo	es, the abo uthorized rida Statul	ive-named by the corp es.	corporation submits this statement for the poration's board of directors. I hereby accept	urpose of chan of the appointm	ging its registered ent as registered
SIGNATURE	Signature, typed or printed hank of registered agent	and title if appricable (NOTE	: Registered /	igent signature	required when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.	*	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	ECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITU			□ c	Change Addition
NAME	KRESTY, DANIEL		1.2 NAM	٤			
STREET ADDRESS	4998 NW 4 AVE		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33431		1.4 C(TY	- ST - ZIP			
TITLE		DELETE	2 1 THU			LJ C	change
NAME			2.2 NAM	E			
STREET ADDRESS			2.3 S1RE	E1 ADDRESS			
CITY-ST-ZIP		T Atutte		/-ST-7IP			
TITLE		☐ DELETE	3.1 11711	- 1		· L 6	hange L Addition
NAME			3.2 NAM				
STREET ADDRESS				E1 ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CIT	r - ST - ZIP -		Пс	hange Addition
NAME :	•	L-J DCCCT	4. 2 NAM			ں ب	mange L Addition
· · · -	7						
STREET ADDRESS			1	ET ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	9.4 GHY 5.1 THU	-SI-ZIP			Change
NAME			5.2 NAM			()	nungo 🗀 Assuran
STREET ADDRESS				ET ADDRESS			
ı j				J			
CITY-ST-ZIP TITLE		DELETE	6.1 TITU	- \$1 - Zip		□ c	hange Addition
NAME			6.2 NAM			<u></u> V	
STREET ADDRESS			1	E1 ADDRESS			
CITY-ST-ZIP				-ST-ZIP			
	w certify that the information supplied	with this filing does not qualify			tated in Section 110 07(3)(i). Florida Statuto	a I further certi	h, 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.