SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

97 SEP -4 PH 102

t. Corporation Name P96000079964 (8) KALOMA, INC.									SEGREWARY OF STAVE TALLAHASSSE FLORIDA				
						•							
Principal Place of Business				Mailing Address						I BUTU TBUTŲ TŪTAŲ T	TILD BINI		
9733 119TH WAY N SEMINOLE FL 33772				9733 119TH WAY N									
DEMINUTE PL 33/12				SEMINOLE FL 33772				DO NOT WRITE IN THIS SPACE					
								1	Date Incorporated or Qualified 09/26/1996	3a. Date of	Last Re	port	
2. Principal P	lace of Busin	ness	2a. M	2a. Mailing Address					FEI Number		Ap	plied For	
21			26						<i>59-3408778</i>		No	t Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5.	Certificate of Status Desired		1.75 A Fee Re	idditional quired	
City & State				City & State				6.	Election Campaign Financing	\$	5.00	May Be	
23				28					Trust Fund Contribution		dded to		
Zip	Country		<u> </u>	Zip		Country			8. This corporation owes or has paid the current year Intangible				
24	25 9. Name and Address of Current			29 30					Personal Property Tax due June 30. X Yes No 10, Name and Address of New Registered Agent				
ODA			viit riogistoi	oo Agont	8	1	Name	10.	name and Address of New Negr	erolog Agoli			
GRANDA, ROBERT 9733 119TH WAY N							6 : 14.11						
	INOLE FL						Street Add	Address (P.O. Box Number is Not Acceptable)					
							City			FL 85	Zip C	Code	
11. Pursuant	to the provis	ions of Sections 607.0	02 and 607.	1508, Florida Statut	es, the abo		-named corp	poration	submits this statement for the pur		aina its	registered	
office or r	egistered ad	ent, or both, in the Sta th, and accept the obl	te of Florida.	Such change was a	authorized I	b۷.	the corpora	ation's b	pard of directors. I hereby accept	the appointm	ent as	registered	
SIGNATURE													
12.	Signature, typed	or printed name of registered a OFFICERS A		· · · · · · · · · · · · · · · · · · ·	Rogistered A	gor	nt signature requi		reinstating) DDITIONS/CHANGES TO OFFICE	DATE RS AND DIRE	CTOR	2 141 2	
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07.34), 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 is changed, or on an attachment with an address.

Kaloma, Inc.

9733 119th Way N. Seminole, FL 33772

August 26, 1997

Division of Corporations **Annual Reports Section** PO Box 1500 Tallahassee, FL 32302-1500

Dear Sir:

I am writing you in response to my conversation with Jackie Kelly on August 14, 1997. This is the first year of the corporation. The original Annual Report packet was never received. As such I was advised to send the basic filing fee of \$165.00 with this form. Please accept this as timely filed.

Sincerely,

Rollio Granda
Prosid

President

RG/d Enc.