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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000036142 (2)

FILED Feb 17 1998 8:00am Secretary of State

KAM HOLDINGS INC.			
Principal Place of Business	Mailing Address		
3631 WIMBLEDON DRIVE LAKE MARY FL 32746	P.O. BOX 950181 LAKE MARY FL 32795		

	- 45. 14			DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				04/23/1997
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21 1743	Oakbrook Drive	26		59-3445933 Not Applicable
Suite, Apt	#, etc.	Suite, Apl. #, elc.		5. Certificate of Status Desired S8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State	1 6 1	City & State		6. Election Campaign Financing \$5.00 May Be
23 Long	(woud, F	28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 327	79 25 Simino la	harman and a second a second and a second an	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
ANI	DERSON, KURT L		81 Name	
363	1 WIMBLEDON DRIVE		82 Street	Address (P.O. Box Number is Not Acceptable)
LAK	E MARY FL 32748		117	Address (P.O. Box Number is Not Acceptable) 9 3 Oa K brook Drive
			83	
			84 City J	A Page 7 in Code
			1 City Z	organism submits this statement for the purpose of changing its registered
11. Pursuant i	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-named	corporation submits this statement for the purpose of changing its registered
office or ri	egistered agent, or both, in the State o m familiar with, and account the obligati	lifilonda, Such change was a ous of Section 607 0505. Flo	uthorized by the corp rida Statutes	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typical or printed harne of registered agent	and the Capperable (NOTE	Registered Agent signature	required when reinstaling) DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PCEO	DELETE	1.1 TITLE	™ Change
NAME	anderson, kurt l		1.2 NAME	
STREET ADDRESS	3631 WIMBLEDON DRIVE		1.3 STREET ADDRESS	1793 Oakbrook Drive
CITY-ST-ZIP	LAKE MARY FL 32746		1.4 CITY - ST - ZIP	Lone wood F1. 32779
TITLE	VPST	☐ DELETE	2.1 TITLE	1793 Oakbrook Drive Longwood F1. 32779
NAME	MATELA, KRZYSZTOF		2.2 NAME	
STREET ADDRESS	3631 WIMBLEDON DRIVE		2.3 STREET ADDRESS	1793 Oakbrook Drive
CITY-ST-ZIP	LAKE MARY FL 32746		2. 4 CITY-ST-ZIP	Longwood, Fl. 32779
TITLE	Date water to our to	DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	3.4 CITY-ST-ZIP	Change Addition
TITLE		ריז וענגונ	4.1 TITLE	
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		☐ DEL€TE	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	
	certify that the information supplied with	this filing does not qualify for		ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information

14. Thereby 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 report vertice 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 of an although that address.

CICNATURE:

CRZE034 (1