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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000085835 (1)

KEN-KAT CONSULTANTS, INC.

Principal Place of Business

Mailing Address

FILED Apr 28 1998 8:00am Secretary of State



10111110		1161114116 AB #1 5001			
1250 EI HALLANDALE BLYD					DO NOT WRITE IN THIS SPACE
House	US ANDRU FLA 330	09			3. Date Incorporated or Qualified 10/03/1997
 i	HOLLYWOOD FL 33019 HOLLYWOOD FL 33019 DELETE TOTEL HOLLYWOOD FL 33019 HOLLYWOOD FL 33019 HOLLYWOOD FL 33019 LANGUE FLA 33049 2a. Mailing Address 2b. Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 27 City & State 28 Country 28 Country 29 30 9. Name and Address of Current Registered Agent CATAUDELLA, STEFANIE 1201 S. OCEAN DRIVE #1406 HOLLYWOOD FL 33019 DELETE 31 32 33 34 DELETE 31 DELETE 31 DELETE 31 DELETE 31 DELETE 31 DELETE 31 DELETE 31				4. FEI Number Applied For
21					65-0784299 Not Applicab
					5. Certificate of Status Desired S8.75 Additional
					Fee Required
—	e	·			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
	Country		Country		This corporation owes or has paid the current year Intangible
24	· · · · · · · · · · · · · · · · · · ·	<u> </u>	—	,	Personal Property Tax due June 30. Yes No
	9. Name and Address of Cu	rrent Registered Agent	1		10. Name and Address of New Registered Agent
C	ATAUDELLA, STEFANIE			81 Name	
HOLLYWOOD FL 33018 2		-	82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
			l	1 4 2 .	50 E. HALANDALE BLUD #505
			ļ-	84 City KA	Unique FL 85 Zip Code 33 00 9
office or r	egistered agent, or both, in the S	tate of Florida. Such change was	authorized	by the corpo	
SIGNATURE					
				Agent signature re	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	Orricina		1.1 101	F I	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	CATAUDELLA STEFANIE		1.2 NAI		· ·
				EET ADDRESS	
1	1 110/11/01/05/05 01 000/10			Y-\$T-ZIP	
			2.1 TIT		Change Addition
NAME	. on E Hall	ANNALO RIVIN HITT	2.2 NAI	ME	
STREET ADDRESS	1570 E. 11mm	MARINE OF A	23 STF	EET ADDRESS	
CITY - ST - ZIP	HALLAN SALL	FUA - 33069	2 4 CII	Y-ST-ZIP	
TITLE		DECETE	3.1 THT	.E	Change Addition
NAME			3.2 NA	AE	
STREET ADDRESS			3.3 STF	EET ADDRESS	
				Y-ST-ZIP	
1		[] DETETE	4.1 TITL	Y	Change Addition
			4. 2 NA	_	
-				EFT ADDRESS	
		Fores		Y - ST - ZIP	
		[] OFFER	5.1 TH		☐ Change ☐ Additio
			5.2 NAM		
1				EET ADDRESS	
		Perese	_	Y-\$1-2IP	Change Addition
1		L DICE	6.1 1111		Citalige Cit Addition
			6.2 NAM		
				EET ADDRESS	
CITY-ST-ZIP			6.4 CIT	Y - ST - ZIP	

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 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: St. La Cotombul

Arrige

984-484-1727