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 # P97000101227 (1)

KALAMATA OF USA, INC.

FILED Feb 26 1998 8:00am Secretary of State

MEDITATION OUT, INC.				
Principal Place of Business	Mailing Address		- I (BEILAGI 110 1011) IDEAL DEAK BOLIL DOISH (1011) I	IBIBI NAKAN MENDINDIN KENI KENI
,	· ·	1 0		
6879 TOWN HARBOR BLVD #1214	6879 TOWN HARBOR BLV	10		
BOCA RATON FL 33433	BOCA RATON FL 33433		DO NOT WRITE IN THI	S SPACE
			3. Date Incorporated or Qualified 11/26/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 435 PLAZA KRAL	26		65-0791770	Not Applicable
Suite, Apt. #, etc	Suita, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional
22	27]			Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 BOCA KATON, FC.	28	Country	Trust Fund Contribution	Added to Fees
24 33432 25 Palos Butch	`	30	This corporation owes or has paid the corporation owes. This corporation owes or has paid the corporation owes.	Yes No
9. Name and Address of Current		301	10. Name and Address of New Registere	
SNELL, RICHARD E		81 Name	41	
6879 TOWN HARBOR BLVD		<u> </u>	KORGE Chronopou	COS
#1214		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	#327
BOCA RATON FL 33433		83	20 10101 11111	
000011111011111100000				
	Λ	84 City 23	oca Raton F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-named corp	oration submits this statement for the purpose	of changing its registered
11. Pursuant to the provisions of Socions 607,050/ and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, 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 agont. I arm familiar with and accept the other office of the state o				
(list conce manufactor limits + moliston				
SIGNATURE Signature typed or printed the story story for	Lord life of applicable (NOTE	Hegistered Agent signature require		/ ' '
12. OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DELETE	1.1 TITLE		Change Addition
NAME SNELL, RICHARD E	•	1.2 NAME		
STREET ADDRESS 6879 TOWN HARBOR BLVD.,	#1214	1.3 STREET ADDRESS		Į
CITY-ST-ZIP BOCA RATON FL 33433		1.4 CITY+ST-ZIP		
TITLE D	☐ DELETE	21 TITLE		Change Addition
NAME CHRONOPOULOS, GEORGE		2.2 NAME		
STREET ADDRESS 6879 TOWN HARBOR BLVD.,	# 1214	2.3 STREET ADDRESS		
CITY-ST-ZIP BOCA RATON FL 33433	·	2.4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3 4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
City-St-ZiP		4.4 City-St-ZiP		
TALE	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS		Į
CITY-ST-ZIP	T 57.77.	5 4 CITY-ST-ZIP		1100
TITLE	L_ DEFETE	61 TITLE		☐ Change ☐ Addition
NAME		E CONTAINT /		4
· · · · · · · · · · · · · · · · · · ·		6.2 NAME		i
STREET ADDRESS CITY-ST-ZIP		6.3 STREET ADDRESS 6.4 City-St-Zip		

indicated on this annual report or supplied which mis ming 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 suppliemental armyal 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 on the receiver of business in Block 12 or Block 13 if changed, or on an attach and ways an address.

SIGNATURE:

SEORGE CHRONOPOULOS ROSILE + 102/19/98 (561) 393-3989