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

**PROFIT** CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Morthani

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000108076 (5)

KSURMAN, INC.

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SECRETARIA OT STATE TALLAMANGES, FLORIDA

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Principal Place	e of Business	Mailing Address			1		<b>=</b> 0 11	1200	
21 S.E. FIRST SUITE 800 MIAMI FL 331		21 S.E. FIRST AVENUE SUITE 800 MIAMI FL 33131			REINSTATEMENT OF COMMON PROPERTY OF THE PROPER				
WW. 1111 / E. 00	•				3. Date Incorporated or Qualified 12/26/1997				
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number			plied For	-
21		26						ot Applicable	-
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	beniupe	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 Added (		
Zip	Country	Zip	<b>—</b>	intry	B. This corporation owes or has p		_ · _	_ ~	
24	25 9. Name and Address of Cur	reent Begintered Agent	30	<del></del>	Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent				-
		rrent Registered Agent		81 Name	(U. raine and Address of New A	Aisteren	Agoni		1
	ENNER, RICHARD M								1
	S.E. FIRST AVENUE ITE 800			82 Street Add	Address (P.O. Box Number is Not Acceptable)				
	AMI FL 33131			83					1
MI	AMI 1 C 30131			24 0			los I Zin i	Code	-
				84 City		FL	85 Zip 6	Code	
11. Pursuant office or r agent. La SIGNATURE	egistered agent, or both, in the Si m familiar with, and accept the of	tate of Florida Such change was a chigations of, Section 607.0305, Florida (1998)	authorize orida Sta Ard	d by the corpora	rporation submits this statement for the ation's board of directors. I hereby acce.)	purpose of the app	of changing it pointment as 26/9	ts registered registered	
12.	Signature, typed or printed name of registered	AND DIRECTORS (NOT	E Registere	d Agent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFI		D DIRECTOR	RS IN 12	6
TITLE	D	DELETE	1.1 1	ITLE			Change	Addition	CR2E034 (10/97
NAME	BRENNER, RICHARD M		AME	; <b>1</b>	24			*	
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NAME			62 N	AME					ı

14. Thereby certify that the information supplied with this firing 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 leport 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 justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change it or on an attachment with an address.

63 STREET ADDRESS

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP