ECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90016 047 \*\*\*150.00

	RA KOSHER KINGDO	OM INC.  Mailing Address 3015 AVENTURA B MIAMI FL 33180					
IMI PL SaleO		MICHIEL COLOU	MIMMI FL 33100			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 11/10/1998	
Principal Place of Business		2a. Mailing Addre	2a. Mailing Address			4. FEI Number	Applied For
Suite, Apt. #, etc.  City, & State		26				65 0889577	Not Applicable
		Suite, Apt. #,	Suite, Apt. #, etc. 27  City & State 28			5. Certificate of Status Desired \$8.75 Additional Fee Required  6. Election Campaign Financing Trust Fund Contribution Added to Fees	
		~ · · · · · · · · · · · · · · · · · · ·					
Zip	Country	Zip		Country		8. This corporation owes the current ye	
	25	29	30	<u> </u>		Intangible Personal Property.	Yes No
	9. Name and Address	of Current Registered Agent		81	Name	10. Name and Address of New Regis	reien Wäsur
FRIE	ND, RICHARD A						
	SUNSET DRIVE PH-80	2		82	Street Address (P.O. Box Number is Not Acceptable)		
SOU	TH MIAMI FL 33143				**		
			•	84	City		85 Zip Code
				100	City		FL   10   10   10   10   10   10   10   1
office or	registered agent, or both, in	the State of Florida. Such chang	ge was autho	orized by	the corporat	oration submits this statement for the purposition's board of directors. I hereby accept the	appointment as registered
agent. I a	registered agent, or both, in am familiar with, and accept Signature, typed or printed name of re	the State of Florida. Such change the obligations of, section 607.0	ge was autho 0505, Florida	orized by a Statutes	the corpora	tion's board of directors. I hereby accept the	appointment as registered
agent. I a	Signature, typed or printed name of re OFFI	the State of Florida. Such change the obligations of, section 607.0	ge was autho 0505, Florida	orized by a Statutes Registered Ac	the corpora	tion's board of directors. I hereby accept the	appointment as registered
agent. I a	am familiar with, and accept Signature, typed or printed name of re OFFIG	the State of Florida. Such chan, the obligations of, section 607.0 rgistered agent and title if applicable.  CERS AND DIRECTORS	ge was autho 0505, Florida	Registered Ag  13.	the corpora	rition's board of directors. I hereby accept the	appointment as registered
agent. I age	Signature, typed or printed name of re OFFIG D EINHORN, MICHAEL	the State of Florida. Such chan, the obligations of, section 607.0 sgistered agent and title if applicable.  CERS AND DIRECTORS	ge was autho 1505, Florida (NOTE: I	Registered Ag  13. 1.1 TITLE 1.2 NAME	the corporal	rition's board of directors. I hereby accept the	PATE RS AND DIRECTORS IN 12
agent. I age	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan, the obligations of, section 607.0 sgistered agent and title if applicable.  CERS AND DIRECTORS	ge was autho 1505, Florida (NOTE: I	registered Ag  13. 1.1 TITLE 1.2 NAME	gent signature re	rition's board of directors. I hereby accept the	PATE RS AND DIRECTORS IN 12
agent. I a GNATURE  E E E E E E E E E E E E E E E E E E	Signature, typed or printed name of re OFFIG D EINHORN, MICHAEL	the State of Florida. Such chan, the obligations of, section 607.0 rigistered agent and title if applicable.  CERS AND DIRECTORS  DE	ge was auth 1505, Florida (NOTE: I	Registered Ac  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-ST	gent signature re	rition's board of directors. I hereby accept the	DATE RS AND DIRECTORS IN 12 Change Addition
agent. I a GNATURE  E E E E E E E E E E E E T S T S T S T	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan, the obligations of, section 607.0 rigistered agent and title if applicable.  CERS AND DIRECTORS  DE	ge was authomore in the second of the second	registered Ag  13. 1.1 TITLE 1.2 NAME	gent signature re	rition's board of directors. I hereby accept the	PATE RS AND DIRECTORS IN 12
agent. I a	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan, the obligations of, section 607.0 rigistered agent and title if applicable.  CERS AND DIRECTORS  DE	ge was auth- 1505, Florida (NOTE: F	Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST- 2.1 TITLE	pent signature re  ADDRESS	rition's board of directors. I hereby accept the	DATE RS AND DIRECTORS IN 12 Change Addition
agent. I a	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan, the obligations of, section 607.0 rigistered agent and title if applicable.  CERS AND DIRECTORS  DE	ge was auth- 1505, Florida (NOTE: F	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST- 2.1 TITLE 2.2 NAME	the corporal  gent signature re  ADDRESS  ADDRESS	rition's board of directors. I hereby accept the	DATE RS AND DIRECTORS IN 12 Change Addition
AGENATURE  AGENATURE  AGENATURESS  (*ST-ZIP  AGENATURESS  AGENATURESS  (*ST-ZIP  AGENATURESS  AGENATURESS  (*ST-ZIP	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan, the obligations of, section 607.0 egistered agent and title if applicable.  CERS AND DIRECTORS  DE	ge was auth- 1505, Florida (NOTE: F	Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST- 2.1 TITLE 2.2 NAME 2.3 STREET 2.3 STREET	the corporal  gent signature re  ADDRESS  ADDRESS	rition's board of directors. I hereby accept the	DATE RS AND DIRECTORS IN 12 Change Addition
agent. I a GNATURE  .E .	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan, the obligations of, section 607.0 egistered agent and title if applicable.  CERS AND DIRECTORS  DE	ge was authosos, Florida (NOTE: F	norized by a Statutes  Registered A;  1.1 TITLE  1.2 NAME  1.3 STREET.  2.1 TITLE  2.2 NAME  2.3 STREET.  3.1 TITLE  3.2 NAME  3.2 NAME	pent signature re ADDRESS -ZIP ADDRESS	rition's board of directors. I hereby accept the	Appointment as registered  DATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition
agent. I a GNATURE  E HE EET ADDRESS (-ST-ZIP E HE EET ADDRESS (-ST-ZIP E EET ADDRESS	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan, the obligations of, section 607.0 egistered agent and title if applicable.  CERS AND DIRECTORS  DE	ge was authosos, Florida (NOTE: F	Registered Ay  13. 1.1 TITLE 1.2 NAME 1.3 STREET. 1.4 CITY-ST- 2.1 TITLE 2.2 NAME 2.3 STREET. 3.1 TITLE 3.2 NAME 3.3 STREET. 3.3 STREET.	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	rition's board of directors. I hereby accept the	Appointment as registered  DATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition
agent. I a GNATURE  E HE EET ADDRESS AST-ZIP E HE EET ADDRESS AST-ZIP LE EET ADDRESS AST-ZIP LE EET ADDRESS AST-ZIP	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan; the obligations of, section 607.0 egistered agent and title if applicable.  CERS AND DIRECTORS  DE  DE	ge was authosos, Florida (NOTE: I LETE LETE	norized by a Statutes  Registered A;  1.1 TITLE  1.2 NAME  1.3 STREET.  1.4 CITY-ST-  2.1 TITLE  2.2 NAME  2.3 STREET.  3.1 TITLE  3.2 NAME  3.3 STREET.  3.4 CITY-ST-  3.4 CITY-ST-	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	rition's board of directors. I hereby accept the	Appointment as registered  DATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition
Agent. I : GNATURE  .E. AE EET ADDRESS Y-ST-ZIP .E. AE EET ADDRESS Y-ST-ZIP .E. AE EET ADDRESS Y-ST-ZIP .E. AE EET ADDRESS	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan; the obligations of, section 607.0 egistered agent and title if applicable.  CERS AND DIRECTORS  DE  DE	ge was authosos, Florida (NOTE: F	norized by a Statutes  Registored At 13.  1.1 TITLE  1.2 NAME  1.3 STREET.  1.4 CITY-ST-  2.1 TITLE  2.2 NAME  2.3 STREET.  3.1 TITLE  3.2 NAME  3.3 STREET.  4.1 TITLE  4.1 TITLE	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	rition's board of directors. I hereby accept the	Appointment as registered  DATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition
agent. I a GNATURE  E HE EET ADDRESS AST-ZIP E AE EET ADDRESS AST-ZIP LE HE EET ADDRESS AST-ZIP LE HE EET ADDRESS	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan; the obligations of, section 607.0 egistered agent and title if applicable.  CERS AND DIRECTORS  DE  DE	ge was authosos, Florida (NOTE: I LETE LETE	norized by a Statutes  Registored At 13.  1.1 TITLE  1.2 NAME  1.3 STREET.  1.4 CITY-ST.  2.1 TITLE  2.2 NAME  2.3 STREET.  3.1 TITLE  3.2 NAME  3.3 STREET.  4.1 TITLE  4.2 NAME  4.2 NAME	pent signature re ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	rition's board of directors. I hereby accept the	Appointment as registered  DATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition
agent. I a GNATURE  E EET ADDRESS /-ST-ZIP  E EET ADDRESS /-ST-ZIP  E EET ADDRESS /-ST-ZIP  E EET ADDRESS	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan; the obligations of, section 607.0 egistered agent and title if applicable.  CERS AND DIRECTORS  DE  DE	ge was authosos, Florida (NOTE: I LETE LETE	norized by a Statutes  Registored Ay  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-ST  2.1 TITLE  2.2 NAME  2.3 STREET  3.1 TITLE  3.2 NAME  3.3 STREET  4.1 TITLE  4.2 NAME  4.3 STREET  4.3 STREET  4.3 STREET  4.3 STREET	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	rition's board of directors. I hereby accept the	Appointment as registered  DATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition
Agent. I a GNATURE  E EET ADDRESS AST-ZIP E AE EET ADDRESS AST-ZIP E EET ADDRESS AST-ZIP E IE EET ADDRESS AST-ZIP E IE EET ADDRESS AST-ZIP	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan; the obligations of, section 607.0 registered agent and title if applicable.  CERS AND DIRECTORS  DE  DE	ge was authingon, Florida (NOTE: I LETE LETE LETE	norized by a Statutes  Registored At 13.  1.1 TITLE  1.2 NAME  1.3 STREET.  1.4 CITY-ST.  2.1 TITLE  2.2 NAME  2.3 STREET.  3.1 TITLE  3.2 NAME  3.3 STREET.  4.1 TITLE  4.2 NAME  4.2 NAME	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	rition's board of directors. I hereby accept the	Appointment as registered  DATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition
Agent. I a GNATURE  E E E E E E E E E E E E E E E E E E	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan; the obligations of, section 607.0 registered agent and title if applicable.  CERS AND DIRECTORS  DE  DE	ge was authingon, Florida (NOTE: I LETE LETE LETE	norized by a Statutes  Registored At 13.  1.1 TITLE  1.2 NAME  1.3 STREET.  1.4 CITY-ST.  2.1 TITLE  2.2 NAME  2.3 STREET.  3.1 TITLE  3.2 NAME  4.1 TITLE  4.2 NAME  4.3 STREET.  4.4 CITY-ST.  4.4 CITY-ST.  4.4 CITY-ST.	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	rition's board of directors. I hereby accept the	Appointment as registered  CATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition
Agent. I : GNATURE  E  #E  #E  #E  #E  #E  #E  #E  #E  #	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan; the obligations of, section 607.0 registered agent and title if applicable.  CERS AND DIRECTORS  DE  DE	ge was authingon, Florida (NOTE: I LETE LETE LETE	norized by a Statutes  Registored Ay  13.  1.1 TITLE  1.2 NAME  1.3 STREET.  1.4 CITY-ST.  2.1 TITLE  2.2 NAME  2.3 STREET.  3.1 TITLE  3.2 NAME  3.3 STREET.  4.1 TITLE  4.2 NAME  4.3 STREET.  4.5 TITLE  4.4 CITY-ST.  5.1 TITLE	and the corporal in the corpor	rition's board of directors. I hereby accept the	Appointment as registered  CATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition
Agent. I : GNATURE  E EET ADDRESS  /-ST-ZIP  E EET ADDRESS  /-ST-ZIP  E EET ADDRESS  /-ST-ZIP  E E ET ADDRESS  /-ST-ZIP  E E E ET ADDRESS  /-ST-ZIP  E IE	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan; the obligations of, section 607.0 registered agent and title if applicable.  CERS AND DIRECTORS  DE  DE	ge was authingon, Florida (NOTE: I LETE LETE LETE	norized by a Statutes  Registered Ad  13.  1.1 IIITLE  1.2 NAME  1.3 STREET.  1.4 CITY-ST.  2.1 TITLE  2.2 NAME  2.3 STREET.  3.1 TITLE  3.2 NAME  3.3 STREET.  4.1 TITLE  4.2 NAME  4.3 STREET.  4.1 TITLE  4.2 NAME  4.3 STREET.  5.1 TITLE  5.1 TITLE  5.2 NAME  5.2 NAME  5.3 NAME  6.3 STREET.  6.4 CITY-ST.  6.5 TITLE  5.1 TITLE  5.2 NAME	ADDRESS ADDRESS ADDRESS ZIP ADDRESS ADDRESS ZIP ADDRESS ADDRESS ADDRESS ADDRESS	rition's board of directors. I hereby accept the	Appointment as registered  CATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition
AGENATURE  EE ME EET ADDRESS  /-ST-ZIP  EET ADDRESS  /-ST-ZIP  EET ADDRESS  /-ST-ZIP  IE  SET ADDRESS ST-ZIP  E  SET ADDRESS ST-ZIP  E  SET ADDRESS	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan, the obligations of, section 607.0 sgistered agent and title if applicable.  CERS AND DIRECTORS  DE  DE	ge was authosoon, Florida (NOTE: F	norized by a Statutes  Registered At 13.  1.1 TITLE 1.2 NAME 1.3 STREET. 1.4 CITY-ST- 2.1 TITLE 2.2 NAME 2.3 STREET. 3.1 TITLE 3.2 NAME 3.3 STREET. 4.1 TITLE 4.2 NAME 4.3 STREET. 5.1 TITLE 5.1 TITLE 5.2 NAME 5.3 STREET.	ADDRESS ADDRESS ADDRESS ZIP ADDRESS ADDRESS ZIP ADDRESS ADDRESS ADDRESS ADDRESS	rition's board of directors. I hereby accept the	Appointment as registered  CATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition
AGENATURE  EET ADDRESS  Y-ST-ZIP  EET ADDRESS  ST-ZIP  EET ADDRESS	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan, the obligations of, section 607.0 sgistered agent and title if applicable.  CERS AND DIRECTORS  DE  DE	ge was authomore in the second	Registered Ay  13. 1.1 TITLE 1.2 NAME 1.3 STREET. 1.4 CITY-ST- 2.1 TITLE 2.2 NAME 2.3 STREET. 3.1 TITLE 3.2 NAME 3.3 STREET. 3.4 CITY-ST- 4.1 TITLE 4.2 NAME 4.3 STREET. 4.4 CITY-ST- 5.1 TITLE 5.2 NAME 5.3 STREET. 6.1 TITLE 6.2 NAME 6.2 NAME 6.2 NAME 6.2 NAME 6.2 NAME 6.2 NAME	the corporal  ADDRESS  -ZIP  ADDRESS  -ZIP  ADDRESS  -ZIP  ADDRESS  -ZIP  ADDRESS  -ZIP  ADDRESS -ZIP	rition's board of directors. I hereby accept the	appointment as registered  DATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Addition
AGENTURE  EET ADDRESS  (-ST-ZIP  EET ADDRESS	Signature, typed or printed name of re OFFIT D EINHORN, MICHAEL 3015 AVENTURA BLVD	the State of Florida. Such chan, the obligations of, section 607.0 sgistered agent and title if applicable.  CERS AND DIRECTORS  DE  DE	ge was authomore in the second	norized by a Statutes  Registered A;  1.1 TITLE  1.2 NAME  1.3 STREET, 1.4 CITY-ST- 2.1 TITLE  2.2 NAME  2.3 STREET, 3.1 TITLE  3.2 NAME - 3.3 STREET, 4.1 TITLE  4.2 NAME  4.3 STREET, 5.1 TITLE  5.2 NAME  5.3 STREET, 5.1 TITLE  5.3 STREET, 5.1 TITLE  5.4 CITY-ST- 5.4 CITY-ST- 5.4 CITY-ST- 6.1 TITLE	ADDRESS -ZIP -ADDRESS -ZIP	rition's board of directors. I hereby accept the	appointment as registered  DATE  RS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Addition

nativated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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.

205 1927988

To Whom it may Concern,

583461-90016-47 July 2,1999 Pg8000095140

Please Wave the Lite Fee For the. Retson I Never Recieven The First Notice AND The Bussiness open IN MANY 26, WAS THE First PAY We Open up.