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PROFIT CORPORATION ANNUAL: REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris.

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90321 009 ***150.00

DOCUMENT # **S03495**

1. Corporation Name

KPI, INC.

Pincipal Place of Business Mailing Address 1020 SW 12511 ST MAMI FL 33176 ST MA		•									
MAM F, 33176 US Solid Sol	Principal Place of Business		Mailing Address							01811 01811 BIQII 0	18(1 81851 1891
2. Principal Place of Business	10220 SW 125TH ST MIAMI FL 33176		MIAMI FL 33176							S SPACE	
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. S. Certificate of Status Desired \$8.75 Additional rise Required 222 27							09/28/1990	or Qualifed			<u>.</u>
27 City & State City & Country City & City		Place of Business				4.				No	t Applicable
Zip Country Zip Country Zip Country Zip Country S. Thus Fund Contribution Added to Fees No Zip	Suite, Apt. #, etc.		— ·			5.	Certificate of Status	Desired		- Fee Re	quired
Zip Country Zip Country Zip Country 8. This corporation owes the current yeer intengible Personal Property Tax. Yes No	City & State		<u>-</u> , *	<u></u> , ´			Trust Fund Contribu	ition		Added t	
SCHIFF, JAMES M. 9100 S DADELAND BLVD. SUITE 1010 MIAMI FL 33156 82 Street Address (P.O. Box Number is Not Acceptable) 83	Zip	<u> </u>	· ·		y 		Personal Property T	Гах.		☐ Yes	□No
SCHIFF, JAMES M. 9100 S DADELAND BLVD. SUITE 1010 MIAMI FL 33156 4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 697.0502 and 697.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, 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 agent, and femiliar with, and accept the obligations of, Section 697.0505, Florida Statutes. SIGNATURE SIGNATURE DPT		9. Name and Address of Curi	rent Registered Agent			10.	Name and Addres	s of New	Registered	1 Agent	
SUCHATURE 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, 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 office or registered agent, and formillar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and formillar with, and accept the obligations of, Section 607.0505, Florida Statutes, section		•				Address (F	P.O. Box Number is N	Not Accept	able)	·	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpositioned agent, 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 agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or protect name of registered agent and title if applicable. NOTE Registered Agent algorithms required when reliability. DATE				83			<u> </u>				
office or registered agent, or both, in the State of Horida. Such change was authorized by the corporation's dearent of infectors. Thereby accept the appointment and accept the obligations of, Section 607, Section	MIAMI FL 33156			84	4 City		· .		FI	85 Zip (Code .
Signature, typed or printed agent and tall fingle-priceable. (Indite Respirator present of printed agent and tall fingle-priceable.) Cofficers AND DIRECTORS 13.					1						
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14. I hereby certify that the information supplied with this filing does not 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 trive 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 russee 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 appears, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP