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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

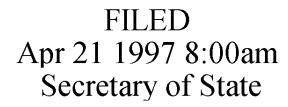
## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S37006

(1)

KEVKO OIL, INC.





Principal Piac	e of Business	Mailing Address		4 100(1010 100 (11)( 100(1) 40(1) 40(1) 40(1)	11 BIBIT (\$1911 BIBIT BIBIT \$1911 BIBIT
11145 NW 27TH AVENUE MIAMI FL 33167		11145 NW 27TH AVENUE MIAMI FL 33167-9419	1		
		•		3. Date Incorporated or Qualified 03/07/1991	3a. Date of Last Report 05/01/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0251170	Not Applicable
Suite. Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27 Charle Charles			Fee Required
City & State	0	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Z(j)	Country	Zip	Contry	8. This corporation has liability fo	
24	25	29	30		Yes No
	9. Name and Address of Cu			10. Name and Address of New R	egistered Agent
KOV	v, kenneth		81 Nam	6	
	45 NW 27 AVE		82 Stree	t Address (P.O. Box Number is Not Accepta	able)
MIA	MI FL 33167		0.700	r vidalos (r.o. box ridinos) is rigividade	
			83		
			84 City		85 Zip Code
			II		FL   63   Zip Cobe
office or r agent. La	to the provisions of Sections dove registered agent, or both, in the S rm familiar with, and accept the o	tate of Florida. Such change was bligations of Section 607.0505, Fl	authorized by the co orida Statutes.	d corporation submits this statement for the progration's board of directors. I hereby accor-	ept the appointment as registered
SIGNATURE	Ship above Typed or protect can glob registers	d agent and title if applicable (NO)	E Registere i Agent signat	ure required when reinstaling)	DATE
12.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TOTALE	PD	DELETE	1.1 TILE		☐ Change ☐ Addition
NAME	KOW, KENNETH		1.2 NAME		
STREET ADDRESS	11145 NW 27 AVE		1.3 STREET ADDRESS	<b>S</b>	
CITY \$1 - ZiP	MIAMI FL		1.4 CITY+ST-ZIP		
TOTALE		☐ DELETE	21 TATLE		Change Addition
NAME			22 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	S	
CITY - \$1 - ZiP			2 4 CITY-ST-ZIP		
THILF		DELETE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS	S	
CHY-ST-ZIP			34. CITY+ST-ZIP		
TITLE		☐ DELETE	4 1 TIŤLÉ		Change Addition
NAML			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	5	
CITY - ST - ZIP		T	4.4 CITY - ST - ZIP		
THE		DELETE	5.1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS	S	
C/TY - ST - 7IP			54 CTY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change  Addition
NAME			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS	S	
C(17 - S1 - 71P			6.4 CTTY-ST-ZIP		
14 Ldo porol	bulged that the information our	valued with this filter done not awall	ify for the everentian	etated in Section 119 07/3)(i) Florida Statu	oe I further certify that the

I do nereby certify that the information supplied with this fling 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 sections, or on an attachment with an address.

**SIGNATURE** 

04-09-97. 305-681-6751