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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortman

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # S64701

(3)

1. Corporation Name
KAPLAW, INC.



Principal Place of Business
3421 BONITA BEACH ROAD
UNIT 408
BONITA SPRINGS FL 33923
US

Mailing Address
3421 BONITA BEACH ROAD
UNIT 408
BONITA SPRINGS FL 33923
US

3. Date Incorporated or Qualified
07/02/1991

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

25

26

30

31

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAPTAIN INVESTMENTS, INC.
3421 BONITA BEACH ROAD
UNIT 408
BONITA SPRINGS FL 33923

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code
33923

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or 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. I am familiar with, and accept the obligations of, Section 607.0507, Florida Statutes.

SIGNATURE

John Kaptyn

JOHN KAPTYN, President

March 27, 1996

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME KAPTYN JOHN
STREET ADDRESS SUITE 200, 650 HWY #7 E
CITY- ST- ZIP RICHMOND HILL ON ☐ DELETE

TITLE P
NAME KAPTYN JOHN
STREET ADDRESS SUITE 200, 650 HWY #7 E
CITY- ST- ZIP RICHMOND HILL ON ☐ DELETE

TITLE T
NAME LAWYER DR JOHN
STREET ADDRESS 1616 GRANT STREET
CITY- ST- ZIP PORTSMOUTH OH ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 if changed or on an addition with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

905-886-4666

March 27, 1996

CR2E034 (12/95)