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PROFIT CORPORATION ANNUAL REPORT 1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S91140

(1)

FILED Mar 02 1998 8:00am Secretary of State

KITCO CORP. Principal Place of Business Mailing Address 1101 SE 8ST PO BX 4745 FT. LAUDERDALE FL 33338 FT. LAUDERDALE FL 33338 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/31/1991 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 65-0305013 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible 30 1 Yes Personal Property Tax due June 30. 29 ess of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MINIACI, LIBBY D. 1101 SE 8ST. Street Address (P.O. Box Number is Ant Acceptable) 82 1975 E. SUNRISE BLVD., #701 83 FT. LAUDERDALE FL 33316 84 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 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 607.0505, Florida Statutes. SIGNATURE Signature, typod or protect name of regescreet egent and little if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13 DELETE TITLE 1.1 TITLE Change Addition MINIACI, LIBBY D. NAME 1.2 NAME 1101 SE 8TH ST. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2 3 STHEET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY - ST - ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6 1 TITLE Change Addition NAME 62 NAME

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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 supplimental 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 attachment with an address.

63 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

Lusa D