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 # V07803

(2)

KISS & COMPANY, INC.

	u oom ann mo								
Principal Place of Business Mailing Address			001100			J sotter Aniace Smitt idabe rates dalde er)	P) WIBN WIBN	DIBIT 10111
1361 SAWGRASS COURT 1361 SAWGRASS C WINTER PARK FL 32782 WINTER PARK FL 3									
						3. Date Incorporated or Qualified	3a. Date	of Last R	eport
						01/21/1992	02/27	7/1996	
2. Principa	ll Place of Business	2a. Mailing Addre	SS			4. FEI Number		Ap	plied For
1		26				59-3107519			t Applicable
	pt #, etc.	Suite, Apt. #,	etc			5. Certificate of Status Desired		\$8.75	
2		27						Fee Re	
City & S	itale	City & State				6. Election Campaign Financing		\$5.00	
Zip	Country	28		Country	,	Trust Fund Contribution		Added 1	
4	25	29	30	,	,	8. This corporation has liability for Florida Statutes	intangible ta		199.032,
*	9, Name and Address of Cur		30	'L		10. Name and Address of New R			
		Total Trogration of Prigotia		81	Name	10. Hans also storings of teast th	-gioto, ed Ag	<u> </u>	
KISS, JEFFREY L.									
1381 SAWGRASS COURT					Street Add	ress (P.O. Box Number is Not Accepta	ble)		
n	ANTER PARK FL 32792			83	 		 		
					<u> </u>				
				84	City		FL	85 Zip (Code
office i agent SIGNATUR	Lam familiar with, and accept the of	oligations of, Section 607.0	0505, Florida	a Statute	S.	poration submits this statement for the tion's board of directors. I hereby acce	pt the appoin	ntment as	registered
12.		AND DIRECTORS	[NOTE: N	13.	e i. signature requ	ADDITIONS/CHANGES TO OFFI		DIRECTOR	S IN 12
TITLE	D	□ D£	LETE	1.1 TITLE				Change	Additio
NAME	KISS, JEFFREY L.			1.2 NAME	}			_ •	
STREET ADORE				1.3 STREET	T ADDRESS				
DITY - ST - ZIP	WINTER PARK FL			1.4 CITY - S					
TITLE		DE	LETE	2 1 TITLE				Change	Additio
NAME				22 NAME	}			-	
STREET ADDRES	ss			23 STAEET	T ADDRESS	4			
CHTY-ST-ZiP				2. 4 CITY -		Ė.,	j.		
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IAME				3.2 NAME	Į				
TREET ADDRE	ss			3 3 STREET	I ADDRESS				
CITY - S1 - ZIF				3 4. CITY -	1				
IIILE		DE	LETE	4.1 TITLE			T	Change	Additi
NAME				4. 2 NAME	l				
STREET ADORE	ec			4 a CYDCES	T ADDRESS	4			

14. If do hereby certify that the information supplied with this filling 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 if changed, or on an attachment with an address.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY: ST-7/P

CITY-ST-ZIP

CITY - ST-ZIP

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TURE AND THE OR PHINTED THE OF SIGNING OFFICER OF DIRECTOR

DELETE

DELETE

1-20-97

417-128-9871

Daytime Phone *

Change

Change

Addition

FILED

Jan 28 1997 8:00am

Secretary of State