PROFIT CORPORATION ANNUAL REPORT 1996		Secretary DIVISION OF C	. Mortham y of State				
OCUMENT #	/38931	(4)					
KISCO PROPERTY MAI	NAGEMENT, INC.						
cipal Place of Business		ling Address				1990)(Q) Q)Q() Q(Q))	
16 NE 10TH ST Alami Fl 33132		16 NE 10TH ST JIAMI FL 33132					
					3. Date Incorporated or Qualified 05/27/1992	3a. Date of 05/0	Last Report)1/1995
Principal Place of Business	2a. 26	Mailing Address			4. FEI Number 65-0341496		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	0 \$	8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	[]	\$5.00 May Be Added to Fees
Zip Count	28 try	Zıp	Countr	y	8. This corporation has liability fo	or intangible tax u es [] No	
25	29 ress of Current Regist	ered Agent	30		Florida Statutes 10. Name and Address of New		ent
9. Hame and Add			81				
stowe, kenneth I. 36 ne 10th st			82	Street Addr	ress (P.O. Box Number is Not Accept	able)	
36 NE 1011 31			8	3			
MIAMI FL 33132							
MIAMI FL 33132					ration submits this statement for the p rd of directors. I hereby accept the ap		B5 Zip Code ing its registered offic gistered agent. I am
MIAMI FL 33132 Pursuant to the provisions of Sec or registered agent, or both, in th familiar with, and accept the oblig SNATURE	gations of, Section 607.0	opplicative (NOT	is, the above ad by the cor			Durpose of chang opointment as rec	ing its registered offic gistered agent. I am RECTORS IN 12
MIAMI FL 33132 Pursuant to the provisions of Sec or registered agent, or both, in th familiar with, and accept the oblig GNATURE Signetice, typed or printed name tree D	ne of registered agent and the Y a	opplicative (NOT	TE: Registered Ag	-named corpor poration's boa	nd when reinstaling)	Durpose of chang ppiointment as reg DATE FFICERS AND D	ing its registered offic gistered agent. I am
MIAMI FL 33132 Pursuant to the provisions of Sec or registered agent, or both, in th familiar with, and accept the oblig SNATURE Signeture, typed or printed name F D STOWE, KENN SEC NO STOWE, KENN	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	orficative (NOT	ss, the above ad by the con TE: Registered Ag 13. 1.1 TiTL 1.2 NAM	-named corpor poration's boa	nd when reinstaling)	Durpose of chang ppiointment as reg DATE FFICERS AND D	ing its registered offic gistered agent. I am
MIAMI FL 33132 Pursuant to the provisions of Sec or registered agent, or both, in th familiar with, and accept the oblig SNATURE Signeture, typed or printed name EVENT STOWE, KENN STOWE, KENN STOWE, KENN STOWE, NENN STOWE, STOWE, ST	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	International Statutes	es, the above ad by the corr TE: Registered Ag 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY	ent signature require E E E E ADDRESS -ST-ZIP	nd when reinstaling)	Durpose of chang oppointment as reg DATE FFICERS AND D	Ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition
MIAMI FL 33132 Pursuant to the provisions of Sec or registered agent, or both, in th familiar with, and accept the oblig SNATURE Signetime, typed or printed rain F F D STOWE, KENN 36 NE 10TH ST MIAMI FL E	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	orficative (NOT	TE: Registered Ag 13. 1.1 TITL 1.2 NAM 1.3 STRE	ent signature require E E E E E E ADDRESS -ST-ZIP E	nd when reinstaling)	Durpose of chang oppointment as reg DATE FFICERS AND D	ing its registered offic gistered agent. I am
MIAMI FL 33132 Pursuant to the provisions of Sec or registered agent, or both, in th familiar with, and accept the oblig SNATURE Signetire, typed or printed nam E F D STOWE, KENN 36 NE 10TH S1 MIAMI FL LE ME	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	International Statutes	TE Registered Agent TE Registered Agent 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRE	ent signature require portation's boar ent signature require E E Et ADDRESS E E E E E E E E E E E E E E E E E E	nd when reinstaling)	Durpose of chang oppointment as reg DATE FFICERS AND D	Ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition
MIAMI FL 33132 Pursuant to the provisions of Sec or registered agent, or both, in th familiar with, and accept the oblig SNATURE Signetife, typed or printed nam The Signetife, typed or printed n	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	International Statutes	TE Registered Agent TE Registered Agent 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRE	ant signature require E E E EI ADDRESS -ST-ZIP E E LT ADDRESS -ST-ZIP	nd when reinstaling)	Durpose of chang oppointment as reg DATE FFICERS AND D	Ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition
MIAMI FL 33132 Pursuant to the provisions of Sec or registered agent, or both, in th familiar with, and accept the oblig SNATURE Signetice, types or printed name EVENTIFY STORE, KENNI 36 NE 10TH ST MIAMI FL LE ME REET ADORESS IY-S1-ZIP LF	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	DELETE	TE Registered Agent of the above add by the constraints of the constra	ent signature require portation's boar ent signature require E E E E E E E E E E E E E E E E E E E	nd when reinstaling)	Durpose of chang oppointment as reg DATE FFICERS AND D	IRECTORS IN 12 Change Addition
MIAMI FL 33132 Pursuant to the provisions of Secon registered agent, or both, in the familiar with, and accept the oblig SINATURE Signeture, types or printed name LF D ME Storwe, types or printed name LF D ME Storwe, types or printed name LF D ME Storwe, tennu 36 NE 10TH SI MIAMI FL LE ME REET ADDRESS IV-S1-ZIP LE ME REET ADDRESS IV-ST-ZIP LF ME REET ADDRESS REET ADDRESS	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	DELETE	IE Registered Age 13. 1.1 THL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 THL 2.2 NAM 2.3 STRE 2.4 CITY 3.1 THL 3.2 NAM 3.3 STRE	ent signature require ent signature require E E E ADDRESS -ST-2IP E E -ST-2IP E E -ST-2IP E E E -ST-2IP E E E E -ST-2IP E E E E E E E E E E E E E	nd when reinstaling)	Durpose of chang oppointment as reg DATE FFICERS AND D	IRECTORS IN 12 Change Addition
MIAMI FL 33132 Pursuant to the provisions of Sec or registered agent, or both, in th familiar with, and accept the oblig GNATURE Signature, types or printed name F B F B STOWE, KENNI 36 NE 10TH S1 MIAMI FL LE ME REET ADDRESS IV-S1-ZIP LF ME REET ADDRESS IV-S1-ZIP	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	DELETE	IE Registered Age 13. 1.1 THL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 THL 2.2 NAM 2.3 STRE 2.4 CITY 3.1 THL 3.2 NAM 3.3 STRE	ent signature require ent signature require E E E E ADDRESS -S1-2IP E E E I ADDRESS -S1-2IP E E E EEI ADDRESS -S1-2IP	nd when reinstaling)	PL Jurpose of chang Darte DATE FFICERS AND D	IRECTORS IN 12 Change Addition
MIAMI FL 33132 Pursuant to the provisions of Secon registered agent, or both, in the familiar with, and accept the oblig GNATURE Signeture, types or printed name LF D ME Strowe, types or printed name LF D ME Strowe, types or printed name LF D ME Strowe, KENNI 36 NE 10TH ST MIAMI FL LE MIAMI FL LF MIAMI FL <td>The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC</td> <td>DELETE</td> <td>IE Registered Age 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.4 CITY 4.1 TITL 4.2 NAM</td> <td>ent signature require portation's board ent signature require e E E FI ADDRESS -ST-ZIP E E E FI ADDRESS -ST-ZIP E E E EFI ADDRESS -ST-ZIP E E E EFI ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E</td> <td>nd when reinstaling)</td> <td>PL Jurpose of chang Darte DATE FFICERS AND D</td> <td>ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition Change Addition</td>	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	DELETE	IE Registered Age 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.4 CITY 4.1 TITL 4.2 NAM	ent signature require portation's board ent signature require e E E FI ADDRESS -ST-ZIP E E E FI ADDRESS -ST-ZIP E E E EFI ADDRESS -ST-ZIP E E E EFI ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	nd when reinstaling)	PL Jurpose of chang Darte DATE FFICERS AND D	ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition Change Addition
MIAMI FL 33132 Pursuant to the provisions of Secon registered agent, or both, in the familiar with, and accept the oblig GNATURE Signeture, typect or printed name LF D ME Signeture, typect or printed name LF D ME StrowE, KENNI 36 NE 10TH ST MIAMI FL LE MIAMI FL ME MIAMI FL ME MIAMI FL ME MIAMI FL MME MIAMI FL ME MIAMI FL ME ME ITH ADDRESS MIAMI FL	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	DELETE	IE Registered Age 13. 1.1 TiTL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STR	ant signature require portation's boar ent signature require E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E EEI ADDRESS -ST-ZIP E E E EI ADDRESS -ST-ZIP E E	nd when reinstaling)	PL Jurpose of chang Darte FFICERS AND D	ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition Change Addition Change Addition
MIAMI FL 33132 Pursuant to the provisions of Sec or registered agent, or both, in th familiar with, and accept the oblig SNATURE Signeture, typector printed name is both statement of printed name is both state	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	DELETE	 Ite Registered Age 13. 1.1 THL 1.2 NAM 1.3 STRE 1.4 CHY 2 1 THL 2 NAM 2 3 STRE 2 4 CHY 3 1 THL 3 2 NAM 3 3 STR 3 4 CHY 4 1 THL 4 2 NAM 4 3 STR 4 4 CHY 5.1 TH 	-named corpor poration's boa ent signature require E E E HADDRESS -ST-ZIP E E E E HADDRESS -ST-ZIP E E E E HADDRESS -ST-ZIP E E E E HADDRESS -ST-ZIP E E E E HADDRESS -ST-ZIP E E E E HADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	nd when reinstaling)	PL Jurpose of chang Darte FFICERS AND D	ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition Change Addition
MIAMI FL 33132 Pursuant to the provisions of Secon registered agent, or both, in the familiar with, and accept the oblig SNATURE Signeture, typector printed name SINATURE Signeture, typector printed name LF D ME SEET ADDRESS Y - S1 - ZIP LE ME REET ADDRESS IV - ST - ZIP LF ME REET ADDRESS IV - ST - ZIP LF ME REET ADDRESS IV - ST - ZIP LF ME REET ADDRESS IV - ST - ZIP ILE ME REET ADDRESS IV - ST - ZIP ILE ME REET ADDRESS IV - ST - ZIP ILE ME REET ADDRESS IV - ST - ZIP ILE ME ME ME	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	DELETE	 Ite Registered Age 13. 1.1 THL 1.2 NAM 1.3 STRE 1.4 CHY 2.1 THL 2.2 NAM 2.3 STRE 2.4 CHY 3.1 THL 3.2 NAM 3.3 STRE 3.4 CHY 4.1 THL 4.2 NAM 4.3 STR 4.4 CHY 5.1 TH 5.2 NAM 	-named corpor poration's boa ent signature require E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	nd when reinstaling)	PL Jurpose of chang Darte FFICERS AND D	ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition Change Addition Change Addition
MIAMI FL 33132 Pursuant to the provisions of Secon registered agent, or both, in the familiar with, and accept the oblig SINATURE Signestre, typed or printed name LF D ME 36 NE 10TH SI ME 36 NE 10TH SI ME MIAMI FL LF D ME 36 NE 10TH SI ME MIAMI FL LE MIAMI FL LF MIAMI FL LE MIAMI FL LE MIAMI FL LE MIAMI FL ME NE REET ADDRESS ITY - ST - ZIP LF ME ME NE REET ADDRESS ITY - ST - ZIP TLE ME ME ME REET ADDRESS ITY - ST - ZIP TLE ME ME ME REET ADDRESS ITY - ST - ZIP TLE ME ME ITY - ST - ZIP TLE ITHE ME ITHE ME ITHE ME ITHE	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	DELETE	 Ite Rogisterod Age 13. 1.1 THL 1.2 NAM 1.3 STRE 1.4 CHY 2.1 THL 2.2 NAM 2.3 STRE 2.4 CHY 3.1 THL 3.2 NAM 3.3 STRE 3.4 CHY 4.1 THL 4.2 NAM 4.3 STRE 4.4 CHY 5.1 THI 5.2 NAM 5.3 STRE 	-named corpor poration's boa ent signature require E E E HADDRESS -ST-ZIP E E E E HADDRESS -ST-ZIP E E E E HADDRESS -ST-ZIP E E E E HADDRESS -ST-ZIP E E E E HADDRESS -ST-ZIP E E E E HADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	nd when reinstaling)	PL Durpose of chang pointment as reg DATE FFICERS AND D	ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
MIAMI FL 33132 Pursuant to the provisions of Sec or registered agent, or both, in th familiar with, and accept the oblig GNA1URE Signeture, typed or printed name UF D STOWE, KENN 36 NE 10TH ST	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	DELETE	 Ite Registered Age 13. 1.1 THL 1.2 NAM 1.3 STRE 1.4 CHY 2.1 THL 2.2 NAM 2.3 STRE 2.4 CHY 3.1 THL 3.2 NAM 3.3 STRE 3.4 CHY 4.1 THL 4.2 NAM 4.3 STRE 4.4 CHY 5.1 TH 5.2 NAM 5.3 STRE 5.4 CHY 6.1 TH 	-named corpor poration's boa ent signature require E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	nd when reinstaling)	PL Durpose of chang pointment as reg DATE FFICERS AND D	ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition Change Addition Change Addition
MIAMI FL 33132 Pursuant to the provisions of Secon registered agent, or both, in the familiar with, and accept the oblig GNATURE Signeture, typed or printed name UF ME Signeture, typed or printed name UF ME REET ADDRESS IY - S1 - ZIP ILE ME REET ADDRESS IY - S1 - ZIP ILE ME REET ADDRESS IY - S1 - ZIP ILE ME REET ADDRESS IY - S1 - ZIP ILE ME REET ADDRESS IY - S1 - ZIP ILE AME IFEL ADDRESS IY - S1 - ZIP ILE AME IFEL ADDRESS IY - S1 - ZIP ILE AME IFEL ADDRESS IY - S1 - ZIP ILE AME IFEL ADDRESS IY - S1 - ZIP ILE AME IREET ADDRESS <t< td=""><td>The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC</td><td>DELETE</td><td> Ite Registered Age 13. 1.1 THL 1.2 NAM 1.3 STRE 1.4 CHY 2.1 THL 2.2 NAM 2.3 STRE 2.4 CHY 3.1 THL 3.2 NAM 3.3 STRE 3.4 CHY 4.1 THL 4.2 NAM 4.3 STRE 4.4 CHY 5.1 TH 5.2 NAM 5.3 STRE 5.4 CHY 6.1 TH 6.2 NAF </td><td>-named corpor poration's boa ent signature require E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E</td><td>nd when reinstaling)</td><td>PL Durpose of chang pointment as reg DATE FFICERS AND D</td><td>ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition</td></t<>	The State of Florida, Such gations of, Section 607.1 me of rejustered agent and the Via OFFICERS AND DIREC	DELETE	 Ite Registered Age 13. 1.1 THL 1.2 NAM 1.3 STRE 1.4 CHY 2.1 THL 2.2 NAM 2.3 STRE 2.4 CHY 3.1 THL 3.2 NAM 3.3 STRE 3.4 CHY 4.1 THL 4.2 NAM 4.3 STRE 4.4 CHY 5.1 TH 5.2 NAM 5.3 STRE 5.4 CHY 6.1 TH 6.2 NAF 	-named corpor poration's boa ent signature require E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	nd when reinstaling)	PL Durpose of chang pointment as reg DATE FFICERS AND D	ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
MIAMI FL 33132 Pursuant to the provisions of Secon registered agent, or both, in the familiar with, and accept the oblig SINATURE Signestre, typed or printed name UF D ME Signestre, typed or printed name UF D ME 36 NE 10TH SI ME MIAMI FL LE MIAMI FL ME ME REET ADDRESS ME IY - SI - ZIP ME IHE I ADDRESS MIAMI FL ITLE MME IHEET ADDRESS ME IY - SI - ZIP ME ILE ME IHEET ADDRESS ME IHEET ADDRESS ME	The State of Florida, Such gations of, Section 607.4 OFFICERS AND DIREC ETH I T	DELETE	SS, the above ad by the correlation TE: Registered Ag 13. 1.1 TiTL 12 NAM 13 STRE 1.4 CITY 2 1 TiTL 2 2 NAM 2 3 STRE 2 4 CITY 3 1 TiTL 3 2 NAW 3 3 STRE 3 4 CITY 4 1 TITL 4 2 NAM 3 3 STRE 3 4 CITY 5 1 TIT 5 2 NAM 5 3 STRE 5 4 CIT 6 1 TIT 6 3 STRE 6 3 STRE	ent signature require ent signature require E E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	nd when reinstaling)		ing its registered offic gistered agent. I am IRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition