

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

FILED

Mar 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V53144** (4)
1. Corporation Name
KELCI CORP.

Principal Place of Business 3610 YACHT CLUB DRIVE SUITE 1402 NORTH MIAMI FL 33180	Mailing Address 3610 YACHT CLUB DRIVE SUITE 1402 NORTH MIAMI FL 33180
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2445 Hollywood Blvd Suite, Apt. #, etc. 22 Hollywood, FL City & State 23 Hollywood, FL Zip 24 33020 Country 25 USA	2a. Mailing Address 26 2445 Hollywood Blvd Suite, Apt. #, etc. 27 Hollywood, FL City & State 28 Hollywood, FL Zip 29 33020 Country 30 USA	3. Date Incorporated or Qualified 07/24/1992	4. FEI Number 65-0351359 Applied For <input type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

**ATLANTIS REGISTERED AGENTS INC.
25 S.E. 2ND AVE.
SUITE 919
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			FL	

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAMSKY, GERALD R.	1.2 NAME	DAMSKY, GERALD R.
STREET ADDRESS	3610 YACHT CLUB DR #1402	1.3 STREET ADDRESS	3640 YACHT CLUB DR. #204
CITY-ST-ZIP	N. MIAMI BEACH FL	1.4 CITY-ST-ZIP	AVENUE, FL 33180
TITLE	TD <input type="checkbox"/> DELETE	2.1 TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BREWER, NANCY E	2.2 NAME	BREWER, NANCY E.
STREET ADDRESS	542 S. LORRAINE	2.3 STREET ADDRESS	2795 EAST VALLEY ROAD
CITY-ST-ZIP	LOS ANGELES CA 90020	2.4 CITY-ST-ZIP	MONTECITO, CA 93108
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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 in an attachment with an address.

SIGNATURE:

 **GERALD R. DAMSKY, PRES**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/28/98
Date

954-929-2233
Daytime Phone

CR2E034 (10/97)