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NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 749874 (4)

1. Corporation Name

KTW FOUNDATION LTD., INC.



Principal Place of Business

Mailing Address

3475 PRAIRIE AVENUE
MIAMI BEACH FL 33140

3475 PRAIRIE AVENUE
MIAMI BEACH FL 33140

3. Date Incorporated or Qualified
11/21/1979

3a. Date of Last Report
01/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EDELSTEIN, EMANUEL
3475 PRAIRIE AVENUE
MIAMI BEACH FL 33140

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, 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

TITLE PD DELETE
NAME EDELSTEIN, EMANUEL
STREET ADDRESS 3475 PRAIRIE AVE.
CITY-ST-ZIP MIAMI BEACH FL

TITLE VD DELETE
NAME KASIERER, IGNACIO
STREET ADDRESS 147 BELGIELEI
CITY-ST-ZIP ANTWERPEN, BELGIUM

TITLE SD DELETE
NAME EDELSTEIN, KLARA
STREET ADDRESS 3475 PRAIRIE AVE.
CITY-ST-ZIP MIAMI BEACH FL

TITLE TD DELETE
NAME KEST, SOL
STREET ADDRESS 5150 OVERLAND AVE
CITY-ST-ZIP CULVER CITY CA

TITLE D DELETE
NAME FELDMAN, HENRICH
STREET ADDRESS 23 OVERLEA RD.
CITY-ST-ZIP LONDON, ENG. E5 0BG

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Emanuel Edelstein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
EMANUEL EDELSTEIN, PD

1/16/96

305-446-8188

Date

Daytime Phone #

CR2E037 (12/95)