

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

**FILED**

**Feb 12 1997 8:00am  
Secretary of State**

PROFIT CORPORATION  
ANNUAL REPORT  
**1997**



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

**DOCUMENT # P24459 (0)**

1. Corporation Name  
**KEW MIAMI ASSOCIATES, LTD., INC.**



Principal Place of Business: **67-52 WOODHAVEN BLVD. REGO PARK NY 11374**  
Mailing Address: **67-53 WOODHAVEN BLVD. ROOM 107 REGO PARK NY 11374-5226 US**

3. Date Incorporated or Qualified: **05/23/1989**  
3a. Date of Last Report: **01/30/1996**

2. Principal Place of Business 2a. Mailing Address

21 **67-53 WOODHAVEN BLVD**

26

4. FEI Number: **11-2961778**  
Applied For:   
Not Applicable:

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

23 City & State: **REGO PARK, N.Y.**

28 City & State

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

24 Zip: **11374**

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC  
1201 HAYES STREET  
STE - 105  
TALLAHASSEE FL 32301**

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 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 type: or printed name of registered agent and file 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**  DELETE  
NAME: **RABENSTEIN, NORMAN**  
STREET ADDRESS: **82-09 GRENELL STREET**  
CITY-ST-ZIP: **KEW GARDENS NY**

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

TITLE: **STD**  DELETE  
NAME: **WEINBACH, MORRIS**  
STREET ADDRESS: **83-19 ABINGDON ROAD**  
CITY-ST-ZIP: **KEW GARDENS NY**

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

TITLE: **VD**  DELETE  
NAME: **WEINBACH, JUDIE**  
STREET ADDRESS: **83-19 ABINGDON ROAD**  
CITY-ST-ZIP: **KEW GARDENS NY**

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

TITLE: **VD**  DELETE  
NAME: **KAUDMAN, JOSEPH**  
STREET ADDRESS: **8 QUICKWAY ROAD**  
CITY-ST-ZIP: **MONROE NY**

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

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

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

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
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 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 change, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

*Morris Weinbach* **MORRIS WEINBACH, SEC./TREAS.**

**2/4/97 (718) 268-6900**

CR2E034 (9/96)