

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra H. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 FEB 15 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # G23937

(7)

1. Corporation Name

KINGS JTNEYS, INC.

Principal Place of Business

**18201 HOMESTEAD AVE
PERRINE FL 33157**

Mailing Address

**18201 HOMESTEAD AVE
PERRINE FL 33157**

3. Date Incorporated or Qualified

02/15/1983

3a. Date of Last Report

02/22/1995

4. FEI Number

42-7147236

Applied For
Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.037,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21. State, Apt. #, etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address

26. State, Apt. #, etc.

27. City & State

28. Zip

29. Country

9. Name and Address of Current Registered Agent

**KING, ISAAH
18201 HOMESTEAD AVE
PERRINE FL 33157**

81. Name **KING, ISAAH**
82. Street Address (P.O. Box Number is Not Acceptable)

83. **8500 N.W. 32ND AVE**
84. City **MIAMI** FL 85. Zip Code **33147**

11. Pursuant to the provisions of Section 607.061 and 607.1408, 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 607.035, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL AGENTS

DATE

12. OFFICERS AND DIRECTORS
12a. Name
12b. Street Address
12c. City & State
12d. Zip
12e. Country
12f. Name
12g. Street Address
12h. City & State
12i. Zip
12j. Country
12k. Name
12l. Street Address
12m. City & State
12n. Zip
12o. Country
12p. Name
12q. Street Address
12r. City & State
12s. Zip
12t. Country

**P
KING, ISAAH
18201 HOMESTEAD AVE
PERRINE FL
V
KING, VERDELL
2931 NW 189 ST
MIAMI FL
T
WALKER, BEVERLY
8500 N.W. 32ND AVE
MIAMI FL
D
KARLUK, ARTHUR W
1454 NW 17 AVENUE
MIAMI FL**

☐ DELETE
☐ DELETE
☐ DELETE
☐ DELETE
☐ DELETE

13. ADDITIONAL AGENTS
13a. Name
13b. Street Address
13c. City & State
13d. Zip
13e. Country
13f. Name
13g. Street Address
13h. City & State
13i. Zip
13j. Country
13k. Name
13l. Street Address
13m. City & State
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13m. City & State
13n. Zip
13o. Country
☐ Change ☐ Add
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14. I, the undersigned, certify that the information supplied in this filing is true and correct, and does not conflict with the information stated in Section 119.071(3)(b), Florida Statutes. I further certify that the information and data in 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. 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 of this report. I do not understand or intend to consent with an affidavit.

SIGNATURE: **Beverly Walker** **Beverly WALKER**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-96 305 324-9981
DATE AND TELEPHONE NUMBER