

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 26, 2000 8:00 am
Secretary of State

05-26-2000 90105 027 ***150.00

DOCUMENT # K16185

1. Entity Name

KING LUDWIG CORPORATION

Principal Place of Business

1305 HOMESTEAD RD
 UNIT F
 LEHIGH ACRES FL 33936
 US

Mailing Address

1305 HOMESTEAD RD
 UNIT F
 LEHIGH ACRES FL 33936-6014
 US

103253



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

747 BENTLEY STREET E
 Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 1446
 Suite, Apt. #, etc.

City & State

LEHIGH ACRES - FL

City & State

LEHIGH ACRES - FL

4. FEI Number

65-0038543

Applied For

Not Applicable

Zip

33972

Country

USA

Zip

33970

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HALUSA, GERHARD
 609 ROBERT AVE
 LEHIGH ACRES FL 33972

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	HALUSA, GERHARD	609 ROBERT	LEHIGH ACRES FL	<input checked="" type="checkbox"/>
VPD	HALUSA, MARIA	609 ROBERT AVE.	LEHIGH FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	HALUSA GERHARD	747 BENTLEY STREET E	LEHIGH ACRES / FLORIDA	<input type="checkbox"/>	<input type="checkbox"/>
VPD	HALUSA MARIA	747 BENTLEY STREET E	LEHIGH ACRES / FLORIDA	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *SIGNATURE OF MARIA HALUSA* MARIA HALUSA

5/8/00

941-368-3852

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #