2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2008
Secretary of State

DOCUMENT# P03000131570

Entity Name: KING HOTEL & SUPPLY CORPORATION

Current Principal Place of Business:

19148 N HIBISCUS ST.
WESTON, FL 33332

New Principal Place of Business:

16353 SW 6 STREET
PEMBROKE PINES, FL 33027

Current Mailing Address:

19148 N HIBISCUS ST.
WESTON, FL 33332

New Mailing Address:

16353 SW 6 STREET
PEMBOKE PINES, FL 33027

FEI Number: 20-0876555 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MURILLO, LUZ M
19148 N HIBISCUS ST.
WESTON, FL 33332 US

Name and Address of New Registered Agent:

JULIAN, MARIA F
16353 SW 6 STREET
PEMBOKE PINES, FL 33027 US

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: MARIA F JULIAN 08/25/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MORALES, EDUARDO
Address: 19148 N HIBISCUS ST.
City-St-Zip: WESTON, FL 33332

Title: D ( ) Delete
Name: MURILLO, LUZ MARIA
Address: 19148 N HIBISCUS ST.
City-St-Zip: WESTON, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ITA, SARAGA
Address: 16353 SW 6 STREET
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D (X) Change ( ) Addition
Name: RODOLFO, AMAYA
Address: 16353 SW 6 STREET
City-St-Zip: PEMBROKE PINES, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ITA SARAGA D 08/25/2008
Electronic Signature of Signing Officer or Director Date