

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

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90037 036 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000096104

1. Corporation Name
KNIGHTS OF SOUNDTABLE, INC.



Principal Place of Business 200 SE 13 STREET FT LAUDERDALE FL 33316	Mailing Address 200 SE 13 STREET FT LAUDERDALE FL 33316
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1904 Players Place Suite, Apt. #, etc. 22 City & State 23 North Lauderdale, FL Zip Country 24 33068 25 USA		2a. Mailing Address 26 1904 Players Place Suite, Apt. #, etc. 27 City & State 28 North Lauderdale, FL Zip Country 29 33068 30 USA		3. Date Incorporated or Qualified 11/10/1998	
		4. FEI Number 592-60-1762		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 owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent

**WILLIAMS, LEVI G
200 SE 13 STREET
FT LAUDERDALE FL 33316**

10. Name and Address of New Registered Agent

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

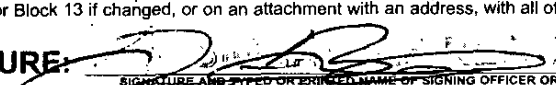
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.	
TITLE	D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BAUGH, DERON A	1.2 NAME	
STREET ADDRESS	1904 PLAYERS PLACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	N LAUDERDALE FL 33068	1.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	GREEN, WADE L	2.2 NAME	
STREET ADDRESS	30 IVY BRIDGE	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRAMPTON ONTARIO CA L6X2V2	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
DERON A. BAUGH

4-29-99 (854) 821-5094
Date Daytime Phone #

CR2E034 (1/98)