

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 624692

FILED  
Apr 09, 2011  
Secretary of State

Entity Name: KING PRODUCTS INC.

**Current Principal Place of Business:**

650 E 29 STREET  
HIALEAH, FL 33013

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 22651  
HIALEAH, FL 33002

**New Mailing Address:**

FEI Number: 59-1981487

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RUIZ, BARTOLOME  
650 E. 29 ST.  
HIALEAH, FL 33013 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: RUIZ, BARTOLOME  
Address: 650 E. 29 ST.  
City-St-Zip: HIALEAH, FL 33013

Title: D  
Name: RUIZ, BARTOLO  
Address: 650 E. 20 ST.  
City-St-Zip: HIALEAH, FL 33013

Title: T  
Name: MAGDA, RUIZ  
Address: 650 EAST 29 STREET  
City-St-Zip: HIALEAH, FL 33013

Title: S  
Name: MATTERO, SONIA  
Address: 650 EAST 29 STREET  
City-St-Zip: HIALEAH, FL 33013

I hereby 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 all other like empowered.

SIGNATURE: BARTOLOME RUIZ

P

04/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date