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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F95000002676

## **FILED** Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90063 046 \*\*\*150.00

KGI POR	T ROYAL, INC.							
Principal Place	e of Business	Mailing Address				- 4 INDPIND THE PARP BRITT ENDS GETT ABOUT ENDING ENDING	- MASIN ISMSA MUSIS	18848 BILL 1881
X5953XVX SENTING Y55VEX 1781 PARK CENTER DRIVE								
x210x	ORLANDO FL 32835				DO NOT WRITE IN THIS	S SPACE		
220 V ORLANDO FL 32835 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX						3. Date Incorporated or Qualifed		
AP.K						06/02/1995		ļ
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For
21 1781 Park Center Dr. 26						57-0982616	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75	Additional
22 27						5. Certifcate of Status Desired	Fee Re	quired
City & State City & State						6. Election Campaign Financing	\$5.00	May Be
23 Orlando, FL 28			-			Trust Fund Contribution	Added t	ρ Fees
Zip	Country	Zip	Countr	У		8. This corporation owes the current year In		<b>-</b> 7
24 3283	5 25 USA	<del></del>	30			Personal Property Tax.	∐Yes	□No
	9. Name and Address of Current	Registered Agent	8	l Marie		10. Name and Address of New Registered	Agent	
СТ	CODDODATION SYSTEM		6	Nam	e			
C T CORPORATION SYSTEM			82	82 Street Address (P.O. Box Number is Not Acceptable)			_	
1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324				83				
PLAI	VIATION FL 33324		8.					÷
			84	City		FI	85 Zip (	Code
				<u>i          </u>		pration submits this statement for the purpose o		gigtorad
12.	Signature, typed or printed name of registered agent	DIRECTORS	13.	ent signatu		when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	DRS IN 12
TITLE	CD X DELETE					resident & Director	A_1 change	M Addition
NAME	KANEKO, OSAMU		1.2 NAME			Steven Miller		
STREET ADDRESS	5933 W CENTURY BLVD STE 2	10		T ADDRE		781 Park Center Drive		
CITY-ST-ZIP	LOS ANGELES CA		1.4 CITY-	ST-ZIP		1ando, FL 32835	Change	Addition
TITLE	PD & DELETE					easurer & Director	X change	*
NAME	KENNINGER, STEVEN C	40	2.2 NAME			chard Goodman		
STREET ADDRESS	5933 W CENTURY BLVD STE 2	10	1	T ADDRE	1. /	781 Park Center Drive	1	
CITY-ST-ZIP	LOS ANGELES CA	₹ DELETE	2.4 CITY- 3.1 TITLE	S1-ZIP	<u>  0 r</u>	lando, FL 32835	Change	Addition
TITLE	VT	X DELETE	3.2 NAME			ecretary & Director	••	K
NAME	CHARLES C FREY			ET ADDRE		omas A. Bell		. ~
STREET ADORESS	ORLANDO FL 32835		3.4. CITY-		1 1 /	81 Park Center Drive		
CITY-ST-ZIP TITLE	V	<b>₩</b> DELETE	4.1 TITLE		- <del> or</del>	lando, FL 32835	Change	☐ Addition
NAME	GENEVIEVE GIANNONI	<b>x</b> -	4. 2 NAME					
STREET ADDRESS	1781 PARK CENTER DR			T ADDRE	ss			
CITY-ST-ZIP	ORLANDO FL 32835			4.4 CITY-ST-ZIP				
TITLE	1	☐ DELETE	5.1 TITLE				☐ Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STRE	ET ADDRE	ss			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE				☐ Change	Addition
NAME			6.2 NAME					
STREET ADDRESS	`		6.3 STRE	ET ADORE	ss		•	
			64 CITY	ST. 7IP	- 1			

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 suppliemental 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.

Thomas A. Bell

SIGNATURE:

(407) 532-1000