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

Mailing Address

8500 N.W. 32 AVE

MIAMI FL 33147

**PROFIT CORPORATION** ANNUAL REPORT

1999

KINGS JITNEYS, INC.

1. Corporation Name

Principal Place of Business

8500 N.W. 32 AVE

MIAMI FL 33147



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jan 25, 1999 8:00am **Secretary of State**

01-25-1999 90060 011 \*\*\*150.00



					DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed	-	
2. Principal Place of Business 2a Mailing Address						02/15/1983		100
J Mailing Addres						4. FEI Number	117	Applied For
Suite, Ap	t. #, etc.	26 Suite A 4 4	iho Aut II			<u>42-7147236</u>		Vot Applicable
2	,	Suite, Apt. #, etc.	Suite, Apt. #, etc.					Additional
City & State			<u>·</u>			5. Certifcate of Status Desired	Fee I	Required
City & State						6. Election Campaign Financing		
Zip	Country Zin					Trust Fund Contribution		May Be I to Fees .,
4	25			Country		8. This corporation owes the current year Intar	Addec	to rees
<del></del>			30				ngible □ Yes	□No
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
KING, ISAIAH				81	Name	Togistered A	9eur	
8500 NW 32ND AVE				82	St		,	
MIAMI FL 33147				02	Street Addr	ress (P.O. Box Number is Not Acceptable)		
MINIMI FL 33147				83			- 100 9000	#10g x3g.x 1gx
				84	City	to the control of the second o	85 Zío	Code
1. Pursuant	to the provisions of Sections 607 0502	and 607 1509 Florida Otal C		لـــا		FL	93 ZID	Code
office or a	registered agent, or both, in the State of	Florida. Such change was a	es, the a uthorized	bove I hv f	-named corporation	poration submits this statement for the purpose of char's board of directors. I hereby accept the appointment	anging its	registered
ugoni. i e	m ramiliar with, and accept the obligatio	ins of, Section 607.0505, Flor	rida Statı	ites.	ine corporatio	of s board of directors. I hereby accept the appointr	nent as re	gistered
IGNATURE		<u> </u>				•		
2.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registr OFFICERS AND DIRECTORS				stered Agent signature required when reinstating) . DATE			
πe	DP OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIPECTO	DC IN 42
ME	_ <del>- '</del>	☐ DELETE	1.1 TIT	LE			Change	
	KING, ISAIAH		1.2 NAME		1	· L	_ Change	☐ Addition
REET ADDRESS	8500 N.W. 32 AVE		1.3 STI	REFTA	ADDRESS .			
TY-ST-ZIP	MIAMI FL 33147		1.4 CITY-ST-ZIP		· I		•	1
T.E.	DVP	☐ DELETE	2.1 1/11		ZIF	<del></del>		
ME	KING, VERDELL		2.2 NAME		ł		] Change -	■ Addition
REETADDRESS				_	ļ	•		
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LE	DI			2. 4 CITY-ST-ZIP			•	•
VIE	WALKER, BEVERLY	☐ DELETE	3.1 TITL	E	ĺ		Change	Addition
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			3.3 STR	EET AL	DORESS			ĺ
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Æ			4, 2 NAM	Œ			Change	Addition
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-ST-ZIP					!	•		
E		☐ DELETE	4.4 CITY 5.1 TITLE		<u> </u>			
E			5.2 NAME				Change .	☐ Addition
ET ADDRESS							٠,	·,
-ST-ZIP	• *		5.3 STRE					
			5.4 CITY-	_	P			}
<u> </u>	And the second	☐ DELETE	6.1 TITLE				Change	Addition
ET ADDRESS	* *		6.2 NAME			:		
1			6.3 STRE	ET ADE	DRESS			1
ST-ZIP			64 CITY	CT 70	.			

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

IGNATURE: