FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

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DOCU 1. Corporation	MENT # G88	579	(9)						
KING	S BAY INVESTMENTS,	INC.							
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Principal Place	e of Business	Mailing Addres	s						
753 N CITRI		753 N CITRU							
PO BOX 229		PO BOX 229	0						
US	IVER FL 34423	CRYSTAL RIV	/ER FL 34423		3. Date Incorporated or C	Jualified	3a. Date	of Last Re	port
					03/02/1984		05	/01/199)5
2. Principal Pl	lace of Business	2a. Mailing Add	lress		4. FET Number 59-2379951				oplied For
Suite, Apt.	#, etc.	Suite, Apt. i	#, etc.						Not Applicable Additional
2		27			5. Certificate of Status De	sired		•	Required
City & State	9	City & State			6. Election Campaign Fina	•	<u></u>	\$5.00) May Be
3 Z _I p	Country	28		N	Trust Fund Contribution	<u> </u>			to Fees
4	25	Zip 29	30	Country	B. This corporation has lia Florida Statutes	bility for inf		under s	199.032,
	9. Name and Address of C				10. Name and Address of			gent	
				81 Name			-	<u></u>	
	PHILLIP W. C.P.A.			82 Street Add	ress (P.O. Box Number is Not A	ccentable)		
	CITRUS AVE								
CRYSTA	AL RIVER FL 34423			83					
				104 63				85 Zip	Code
				84 City				103 1 74	
or register	to the provisions of Sections 607 red agent, or both, in the State of th, and accept the obligations of,	i Florida. Sucri chande was	autoorized by ti	above pamed serve	ration submits this statement fo ard of directors. I hereby accept	r the purpo the appoir	FL ose of chan ntment as re		egistered office agent. I am
familiar wit	th, and accept the obligations of, Signature, typed or printed name of registere	Florida: Such change was Section 607.0505, Florida agent and tile if applicative.	Statutes. (NOTE Regist	above-named corpone corporation's boa	ard of directors. Thereby accept	the appoir	ose of chan ntment as re	ging its re egistered	agent. I am
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oath; that I am an officer or director of the corporation or the receiver or trustee empowered temperars in Block 12 or Block 13 if changed, or on an attrachment with an address.

SIGNATURE: FLOYD F. WADE. PRESIDENT SIGNATURE and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-96 Dare 352-795-6118