2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Apr 26, 2004 8:00 am Secretary of State DOCUMENT # J93743 1. Entity Name 04-26-2004 90562 002 ***158.75 COLOR-KING, INC. Principal Place of Business Mailing Address 928 SLIGH AVE 928 SLIGH AVE SEFFNER FL 33584 SEFFNER FL 33584 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) Applied For City & State City & State 4. FEI Number NO-T APPLICABLE Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BENUS; EDWARD P. COLE, ROBERT F. Street Address (P.O. Box Number is Not Acceptable) 509 NANTUCKET DR. **TAMPA FL 33617** 2324 CYPRESS WALK WAY City Zip Code RUSKIN 33570 8. 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. I am familiar with, and accept the obligations of registered agent. EDWARD P. BENUS, PRESIDENT (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE Delete TITLE ☐ Change Addition PRESIDENT COLE, ROBERT F. NAME NAME BENUS, EDWARD P. 928 SLIGH AVE. 928 SLIGHT AVE. STREET ADDRESS STREET ADDRESS SEFFNER FL 33584 CITY-ST-ZIP CITY-ST-ZIP TITLE **⊠** Delete TITLE Addition VICE PRESIDENT NAME GRIFFIN, JEFFREY R. NAME BENUS, LYNN H. STREET ADDRESS 928 SLIGHT AVE STREET ADDRESS 928 SLIGH AVE. SEFFNER FL 33584 CITY-ST-ZIP CITY-ST-7IP SEFFNER, FL 33584 Addition TITLE ☐ Delete TITLE Change SECRETARY NAME NAME BENUS, EDWARD P. 928 SLIGH AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SEFFNER, FL 33584 ☐ Change X Addition ☐ Delete TITLE TITLE TREASURER MULARONI, CATHERINE A. NAME NAME 928 SLIGH AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SEFFNER, FL 33584 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Defete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

4-21-04 Date