

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Martin  
Secretary of State  
TALLAHASSEE, FLORIDA 32304

APPROVED  
AND  
FILED

MAY - 1 PM 2:31

TALLAHASSEE, FLORIDA

DOCUMENT # K76743

(9)

1. Corporation Name

KINGS-SON, INC.

Principal Office of Registration		Mailing Address	
1. Hsin Ting Chang 550 ANCHOR RODE DR NAPLES, FL 33940 33940-2716		2. Mailing Address	
21	26	3. State/ Apt. #	4. City/ Apt. #
State: Aprt. #	City: Aprt. #	5. County	6. County
22	27	7. Zip Code	8. Zip Code
9. City/ State	10. City/ State	11. County	12. County
23	28	13. Zip Code	14. Zip Code
15	25	16. Zip Code	17. Zip Code
18	29	19. Zip Code	20. Zip Code

% Hsin Ting Chang  
550 ANCHOR RODE DR  
NAPLES, FL 33940 33940-2716

DO NOT WRITE IN THIS SPACE

3. Date Incorporated/Quarterm	4. Date of Last Report
03/27/1989	05/01/1994
5. FEI Number	6. Applied For
65-0121106	Not Applicable
7. Certificate of Status Desired	8. \$8.75 Additional Fee Required
8. Political Campaign Fundraiser	9. \$5.00 May Be Added to Fees
Trust Fund Contributor	
10. This corporation has waived its right to sue under section 198.062	
Honoraria Waiver	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

## 9. Name and Address of Current Registered Agent

CHANG, HSIN TING  
550 ANCHOR RODE DR  
NAPLES FL 33940

81	Name
82	Street Address (P.O. Box Number if Not Acceptable)
83	City
84	Zip Code
85	FL

11. I, the undersigned, the president or managing member of the corporation, do hereby declare that the above named corporation, thus authorized by the powers of attorney of registered officer or responsible officer listed on the date of filing, in which name was authorized by the corporation's Board of Directors, thereby caused the incorporation to be registered as a sole proprietorship, and that the above named individual is the true and actual owner of the corporation.

## Sole Proprietor

12.	PD CHANG, HSIN TING 550 ANCHOR RODE DR NAPLES FL
13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS, IF ANY
14.	V.D CHANG, TONY J. 550 ANCHOR RODE DR NAPLES FL
15.	STD CHANG, LIN HUEI-YI 550 ANCHOR RODE DR NAPLES FL
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19.	
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29.	
30.	

1. Name	2. Name	3. Name	4. Name
5. Name	6. Name	7. Name	8. Name
9. Name	10. Name	11. Name	12. Name
13. Name	14. Name	15. Name	16. Name
17. Name	18. Name	19. Name	20. Name
21. Name	22. Name	23. Name	24. Name
25. Name	26. Name	27. Name	28. Name
29. Name	30. Name	31. Name	32. Name
33. Name	34. Name	35. Name	36. Name
37. Name	38. Name	39. Name	40. Name
41. Name	42. Name	43. Name	44. Name
45. Name	46. Name	47. Name	48. Name
49. Name	50. Name	51. Name	52. Name
53. Name	54. Name	55. Name	56. Name
57. Name	58. Name	59. Name	60. Name
61. Name	62. Name	63. Name	64. Name
65. Name	66. Name	67. Name	68. Name
69. Name	70. Name	71. Name	72. Name
73. Name	74. Name	75. Name	76. Name
77. Name	78. Name	79. Name	80. Name
81. Name	82. Name	83. Name	84. Name
85. Name	86. Name	87. Name	88. Name
89. Name	90. Name	91. Name	92. Name
93. Name	94. Name	95. Name	96. Name
97. Name	98. Name	99. Name	100. Name

12. I declare, under penalty of perjury, that the information supplied with this form is voluntarily furnished and disclosed orally for the inscription stated in the Florida Statutes, Chapter 409, that the information contained in this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made orally. That I am the officer or director of the corporation or the receiver or trustee empowered to execute the reports as required by Chapter 409, Florida Statutes, and that my name appears at Block 13 or Block 14 of the original document or affidavit without alteration.

SIGNATURE: X *Hsin Ting Chang*  
Hsin Ting Chang, President

X 4/30/95

(813) 591-1800