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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	1997	Secretary of State DIVISION OF CORPORATIONS			Secretary of State				
	MENT # K ' N'S AUTO KRAF		(2)						
Princ-pal Place			g Address	ABUEV				\$1541 \$1511 \$	[B]]
69 COLLEGE DI SUITE 3		1418 K	C/O DAVID A. KING. ATTORNEY 1416 KINGSLEY AVE						
ORANGE PARK US	FL 32065	ORANG	ie park fl 32073-	4509		3. Date Incorporated or Qualified 04/04/1989		of Last Re	port
2. Principa ¹ Pi	ace of Business	2a. Ma	illing Address		 	4. FEI Number 59-294 1954		Apr	plied For Applicable
Suite, Apt.	#, etc		ite, Apt. #, etc.			5. Certificate of Status Desired	X	\$8.75 A	dditlonat
City & State)		y & State			Election Campaign Financing Trust Fund Contribution	/ \	\$5.00 i	•
23 Zip	Coun	try Zig)	Country		8. This corporation has liability for	intengible ta	x onder s.	
24	25 9. Name and Addr	29 ess of Current Registere	d Agent	30		10. Name and Address of New Re			
	i, david a.			81	Name				
	DRNEY AT LAW			82	Street Add	ress (P.O. Box Number is Not Acceptate	ole)		
	KINGSLEY AVE	20		83					-i
UKA	NGE PARK FL 3207	3							
				84	City	•	FL	85 Zip C	;ode
office or r agent 1 a	egistered agent, or bo	ctions 607.0502 and 607.1 th, in the State of Florida. Ecopt the obligations of, Se	Such change was	authorized by	the corpora	poration submits this statement for the patients board of directors. I hereby acce	ourpose of c pt the appoi	hanging its ntment as i	registered registered
SIGNATURE	Signature, typed or printed har	ne of registered agent and the flap	plicable (NO	TE: Registered Age	nt signature requ	ired whon reinstating)	DATE		
12.		OFFICERS AND DIRECTO		13.		ADDITIONS/CHANGES TO OFFIC			
THILE	dpt Hartman, Roge	חם	☐ DELETE	1,1 TITLE			L.	_] Change	☐ Addition
NAMÉ OTOTOT Abboticos	571 THOMAS MCI			1,2 NAME	ANODECC				
STREET ADDRESS CHTY-ST-ZEF	ORANGE PARK FI			1,3 STREET 1,4 CITY- S	i				
TITLE	010110111111111111111111111111111111111		DELETE	21 TITLE			Г	Change	Addition
NAME				22 NAME	}				İ
STREET ADDRESS				2.3 STREET	address				
CITY - ST - ZIP				2. 4 CiTY - S	T - ZIP				
TOLE			DELETE	3.1 TITLE	1		L	Change	Addition
NAME				3.2 NAME	4000E00				
STREET ADDRESS				3.3 STREET					
CITY - ST - ZIP TITLE			DELETE	3.4. CITY - 5 4.1 TITLE	or-Zir			Change	Addition
NAME:				4. 2 NAME					
STREET ADDRESS				4.3 STREET	ADDRESS	•			
CITY - \$1 - ZIP				4.4 CITY-S	I - ZIP				
TITLE			DELETE	5.1 TITLE	{		L	Change	Addition
NAME				52 NAME					
STREET ADDRESS	I.			5.3 STREET	· ·				
CITY-ST-ZIP			DELETE	5.4 CITY - S 6.1 TITLE	T-2IP		Т	Change	Addition
TITLE NAME			_ section	6.2 NAME			_	- v8v	
STREET ADDRESS				6.3 STREET	ADDRESS				
CITY-ST-ZIP				6.4 CITY-S	F				
	by certify that the infor	mation supplied with this f	iling does not qua			ed in Section 119.07(3)(i), Florida Statute	es. I further o	ertify 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 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.

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Roger D. Hartman, President

20-97

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FILED

Jan 31 1997 8:00am