SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

BLUE KNIGHT INC.

Principal Place of Business	Mailing Address	_	
P.O. BOX 1661 HOLLYWOOD FL 33021 US	P.O. BOX 1661 HOLLYWOOD FL 33021 US		
•			

FILED Jul 27, 1999 8:00 am Secretary of State

07-27-1999 90029 013 ***150.00

596776 - 90029 - 13



DO NOT WRITE IN THIS SPACE

										3. Date Incorporated or Qualified 01/08/1990							
2. Principal Place of Business				2a. Mailing Address						4. FEI Number Applied For						1	
21	¬ '									59-2990297				Not Applicable			
Suite, Apt. #, etc.			- 27	Suite, Apt. #, etc.						5. Certificate of Status Desired \$8.75 Additional Fee Required						1	
City & Stat	e		- 2,1	City & St	ate					6. Election Campaign Financing		S:	5.00	May	Re	1	
23			28							Trust Fund Contribution			dded 1				
Zip	Country				Zip Country				8. This corporation owes the current year						1		
24	25 29 30													Yes 📝 No			
9. Name and Address of Current Registered Agent								-		10. Name and Address of New Ro	gistered A	gent	jent				
							81	Name				_				7	
HONES, FRANCIS J.							00	04	(D.O. O.)							┨	
	54 SW 14						02	82 Street Address (P.O. Box Number is Not Acceptable)									
PEN	abroke Pi	NES FL 33026					83	_								1	
		•								· · · · · · · · · · · · · · · · · · ·						╛	
							84	City			FL	85	Zip (Code		4	
office or	registered as	sions of sections 607.05 gent, or both, in the Stat rith, and accept the obli	te of Flori	da. Such d	hange was:	authori	zed by	the corpo	orporat oration	tion submits this statement for the pur o's board of directors. I hereby accept	pose of cha	anging tment	its re as re	gister gister	ed		
SIGNATURE	Claration has a	or printed name of registered ag		H continuels	(M	OTE: Ba	virtamed A	ant signatur	n ramidra	ed when reinstating)	DATE				_	1.	
12.	Signature, typeu			 _			3.	gent orginator	e reduire	ADDITIONS/CHANGES TO OFF		DIR	ECTO	RS II	N 12	1 8	
TITLE	OFFICERS AND DIRECTORS Delete						TITLE			7.001.010701.0101010101.	<u> </u>	_	nange	$\overline{}$	Addition	10	
NAME	HONES, FRANCIS J.						2 NAME				L		ango	ш.	radillori	5	
_	4000 A 0111 A 000						3 STREET ADDRESS									Ì	
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STREET ADDRESS						6.3	STREET	ADDRESS								1	
CITY-ST-ZIP						6.4	CITY-ST	-ZIP				_				_[

14. I hereby certify that the information supplied with this fijing 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 officer or director of the corporation of 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 an antata syment with an address.

SIGNATURE:

L40746 596776-90029-13

BLUE KNIGHT INC.

P.O. Box 221661 Hollywood, Florida 33022-1661

July 21, 1999

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

RE: Blue Knight Inc. FEI 59-2990297

To Whom it may concern:

I have recently received document # L40746 which is a second notice of the 1999 Profit Corporation Annual Report. This document advises that a late fee is due to this report not being filed by May. This fee should not be assessed as we did not receive a first notice that this report was due. As such, I have enclosed the standard fee of \$150. If there are any problems please contact me.

Sincerely.

Francis J. Hones

President