

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107900

FILED
Feb 02, 2004
Secretary of State

Entity Name: KINGS PLACE DEVELOPMENT INC.

Current Principal Place of Business:

1220 SW 72ND AVE
MIAMI, FL 33144

New Principal Place of Business:

17605 SW 167 AVENUE
MIAMI, FL 33187

Current Mailing Address:

PO BOX 441363
MIAMI, FL 33144

New Mailing Address:

PO BOX 771254
MIAMI, FL 33177

FEI Number: 73-1628378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, AURORA
1220 SW 72ND AVE
MIAMI, FL 33144

Name and Address of New Registered Agent:

GONZALEZ, AURORA
17605 SW 167 AVENUE
MIAMI, FL 33187

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.

SIGNATURE:

02/02/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GONZALEZ, TOMAS C
Address: 1220 SW 72 AVE
City-St-Zip: MIAMI, FL 33144

Title: S () Delete
Name: GONZALEZ, AURORA
Address: 1220 SW 72 AVE
City-St-Zip: MIAMI, FL 33144

Title: V () Delete
Name: MORALES, RENE
Address: 15997 S.W. 288 STREET
City-St-Zip: HOMESTEAD, FL 33033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, TOMAS C
Address: 17605 SW 167 AVENUE
City-St-Zip: MIAMI, FL 33187

Title: S (X) Change () Addition
Name: GONZALEZ, AURORA
Address: 17605 SW 167 AVENUE
City-St-Zip: MIAMI, FL 33187

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AURORA GONZALEZ

S

02/02/2004

Electronic Signature of Signing Officer or Director

Date