## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000077332

Entity Name: KING AND QUEEN OF SOUTH FLORIDA, INC.

FILED Aug 02, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

8521 PINES BOULEVARD PEMBROKE PINES, FL 33024

**Current Mailing Address: New Mailing Address:** 

8521 PINES BOULEVARD PEMBROKE PINES, FL 33024

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KURLAND, JACQUELINE I FRANK, MARLAINE 8521 PINES BOULEVARD 11011 SHERIDAN STREET PEMBROKE PINES, FL 33024 US COOPER CITY, FL 33026 US

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: FRANK, MARLAINE 08/02/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

VΡ

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VΡ

Title: ( ) Delete (X) Change ( ) Addition KING, CHRISTIAN FRANK, MARLAINE Name: Name: 15961 S.W. 61 STREET 8521 PINES BOULEVARD Address: Address:

City-St-Zip: **DAVIE, FL 33331** City-St-Zip: PEMBROKE PINES, FL 33024

Title: Title: (X) Change ( ) Addition () Delete Name: KING, LOYDA Name: FRANK, MARLAINE 15961 S.W. 61 STREET 8521 PINES BOULEVARD Address: Address: PEMBROKE PINES, FL 33024 **DAVIE, FL 33331** City-St-Zip: City-St-Zip:

Title: (X) Change ( ) Addition Title: ( ) Delete

KING, LOYDA Name: FRANK, MARLAINE Name: 15961 S.W. 61 STREET 8521 PINES BOULEVARD Address: Address: City-St-Zip: **DAVIE, FL 33331** City-St-Zip: PEMBROKE PINES, FL 33024

Title: () Delete Title: (X) Change ( ) Addition

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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: FRANK, MARLAINE MRS 08/02/2007