

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000095003

**FILED**  
**Feb 23, 2009**  
**Secretary of State**

**Entity Name:** KING INVESTMENT & MANAGEMENT, INC.

**Current Principal Place of Business:**

14021 SW 143 CT #6  
MIAMI, FL 33186

**New Principal Place of Business:**

14272 S.W. 140 ST  
111  
MIAMI, FL 33186

**Current Mailing Address:**

14021 SW 143 CT #6  
MIAMI, FL 33186

**New Mailing Address:**

14272 S.W. 140 ST  
111  
MIAMI, FL 33186

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

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

LOPEZ, JOSE  
14021 SW 143 CT #6  
MIAMI, FL 33186    US

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

LOPEZ, JOSE  
14272 S.W. 140 ST  
111  
MIAMI, FL 33186 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/23/2009

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title:            PD            ( ) Delete  
Name:           LOPEZ, JOSE  
Address:        14021 SW 143 CT #6  
City-St-Zip:    MIAMI, FL 33186

Title:            SD            ( ) Delete  
Name:           LOPEZ, BARBARA  
Address:        14021 SW 143 CT #6  
City-St-Zip:    MIAMI, FL 33186

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            PD            (X) Change ( ) Addition  
Name:           LOPEZ, JOSE  
Address:        14272 S.W. 140 ST  
City-St-Zip:    MIAMI, FL 33186

Title:            SD            (X) Change ( ) Addition  
Name:           LOPEZ, BARBARA  
Address:        14272 S.W. 140 ST # 111  
City-St-Zip:    MIAMI, FL 33186

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: JOSE E. LOPEZ

Electronic Signature of Signing Officer or Director

PD

02/23/2009

Date