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

PROFIT CORPORATION ANNUAL REPORT

1998

DN DRT FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P40734

l (6)

FILED Feb 11 1998 8:00am Secretary of State

KING A		I, LTD., INC.	•	•					1181 81811 818	<b>                                    </b>	
Principal Plan	e of Busines		Mailing Address						DIRI DIDIL DIT	il filmi dhen did	II <b>e</b> ffoli fool
Principal Place of Business Mailing Address  3350 WHITEFORD RD. 3350 WHITEFORD RD.							ĺ				
YORK PA 17402 YORK PA 17402						Ì					
								DO NOT WRI		SPACE	
								<ol><li>Date Incorporated or Qualifie 09/09/1992</li></ol>	O .		
2. Principal Place of Business			2a. Mailing Addr	2a. Mailing Address				4. FEI Number			pplied For
21			26					23-2473190			ot Applicable
Suite, Apt. #, etc			Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired	
City & State			City & State	City & State				6. Election Campaign Financing	•	\$5.00	May Be
23			28				Trust Fund Contribution			to Fees	
Zip		Country	Zip		Country			8. This corporation owes or has	•		:
24	9. Name and Address of Curre		29 29 Acent			0		Personal Property Tax due Ju  10. Name and Address of New			<u></u>
		ATION SYSTEM	aur uaftistatan wilaut		81	Name		IV. Name and Address of New	Language (	- Agair	
1200 S PINE ISLAND RD PLANTATION FL 33324				8:			Addres	s (P.O. Box Number is Not Accept	table)		
'	***********				63						
					В4	City			Fl	<b>85</b> Zip	Code
11. Pursuant	to the provis	ions of Sections 607.0	502 and 607 1508. Florid	ia Slatutes	the above	-named	carnor	ation submits this statement for the		of changing i	ts registered
office or re	egistered ag m familiar wi	ent, or both, in the Sta th, and accept the obl	ate of Horida, Such chan breations of Section 607	ge was auth	norized by	the corp	poration	ation submits this statement for the n's board of directors. I hereby acc	cept the ap	pointment as	registered
) Lyona ita	•		against of, Control Cov.	0300, 1 101101	a Statutes	<b>3</b> .					1
SIGNATURE											· <del></del>
SIGNATURE		or printed name of regulared						when reinstaling)  ADDITIONS/CHANGES TO OF	DATE		
SIGNATURE	Signature: lyped	OFFICERS A	ngest and title if applicable	(NOTE Re	egistered Age			when reinstaling)	DATE		
SIGNATURE	Signature, lyped S KAHLBA	OFFICERS A	agent and title of applicable	(NOTE Re	egistered Age			when reinstaling)	DATE	D DIRECTOR	RS IN 12
SIGNATURE  12. TITLE	S KAHLBA 3350 W	OFFICERS A OFFICERS A AUGH, RICHARD S HITEFORD RD.	agent and title of applicable	(NOTE Re	13.	int signature		when reinstaling)	DATE	D DIRECTOR	RS IN 12
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64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 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 orderes.

SIGNATURE:

MALL

Gary J. Orndorff

1/27/98

(717)757-0000