


FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90037 023 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P92000014660

1. Corporation Name

AAA KING COLE ENTERPRISES INC.

Principal Place of Business

1500 NW 35TH ST.
MIAMI FL

Mailing Address

1500 NW 35TH ST.
MIAMI FL

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

12/23/1992

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0376379

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing ☐\$5.00 May Be
Added to Fees

8. This corporation owes the current year, Intangible

Personal Property Tax.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~GRODIN, HERBERT~~
 1500 NW 35TH ST.
 MIAMI FL

10. Name and Address of New Registered Agent

81 Name

HARRY BAUMANN

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

33142

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE



HARRY BAUMANN

(NOTE: Registered Agent signature required when reinstating)

3/3/99

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME VM BAUMANN, HARRY

STREET ADDRESS 1500 NW 35TH ST.

CITY-ST-ZIP MIAMI FL 33142

1.2 NAME ☐ DELETE

NAME PDST BAUMANN, ELEANOR

STREET ADDRESS 1500 NW 35TH ST.

CITY-ST-ZIP MIAMI FL 33142

1.3 NAME ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.4 NAME ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.5 NAME ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.6 NAME ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.7 NAME ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 address, with all other like empowered.

SIGNATURE:



3/3/99

Daytime Phone #

CR2E034 (1/198)