FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90013 049 \*\*\*150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUI	VIEN I # P93000	)045917°			à		
1. Corporation Name KINGS TROLLEY CO., INC.					,		
KINGS I	HULLET CO., INC.					IK <b>Disa</b> i <b>siria idia</b> i '	11611 1661 1661
Direct Disease	· · · · · · · · · · · · · · · · · · ·	Mailing Address					
Principal Place		,					
998 S. MILITARY TRAIL DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442							
US US				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		
					06/21/1993		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	<u> </u>	plied For
21	<u> </u>	26			59-2757161		t Applicable
Suite, Apt.	•	<b>—</b>	Suite, Apt. #, etc.		5. Certifcate of Status Desired	<b>\$8.75</b> A Fee Red	
<u> </u>	and the control of th	27	City & Chat			<del></del>	<del></del>
City & State	City & State			6. Election Campaign Financing  Trust Fund Contribution	<b>\$5.00</b> to Added to	, ,	
23 Tin					8. This corporation owes the current year li		77 000
Zip	· • • • • •				Personal Property Tax.		□No
24	9. Name and Address of Curre				10. Name and Address of New Registered	d Agent	
	5, Italie Blid Addiess of Galler	The distance of the second	81	Name			
PERI	EZ, JOSEPH D.		82		(DA DA LA		
3947 NW 7TH PLACE 6250 SWAN'S TETTACE				Street Ad	Idress (P.O. Box Number is Not Acceptable)		
DEE	RFIELD BEACH FL 33442- LOCA	nut Crack Fl	83				
	un	33073	3				
		3575	84	City	F	■ 85 Zip C	ode
44 Dumumat	to the provisions of Sections 607 05	02 and 607 1508. Florida Statutes	the above	e-named co	rnoration submits this statement for the purpose of	of changing its	registered
office or re	anistered agent or both in the State	of Florida, Such change was auti	horized by	the corpora	ation's board of directors. I hereby accept the app	ointment as rec	gistered
agent. I ai	m familiar with, and accept the obliga	ations of, Section 607.0505, Florid	da Statutes	•			
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable (NOTE: R	Registered Ager	it signature regu	uired when reinstating) DATE		\
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		· ·	Change	☐ Addition
NAME	PEREZ, JOSEPH D SR		1.2 NAME				i
STREET ADDRESS	3947 NW 7TH PLACE		1.3 STREET ADDRESS 62		250 Swan's Terrace		}
CITY-ST-ZIP	DEERFIELD BEACH FL		1.4 CITY-ST-ZIP		bronut Creek Fl. 33073	\$	
TITLE	VT DELETE		2.1 TITLE			Change	☐ Addition
NAME	<u> </u>		2.2 NAME		<b>3</b> 4		1
STREET ADDRESS	3947 NW 7TH PLACE		2.3 STREET	TADDRESS 4	1771 NW 13th AVENUE	,	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		2.4 CITY-5	بجار	POMPANO BOLL FI. 330	64	
TITLE			3.1 TITLE			€hange	☐ Addition
NAME	PEREZ. DARCY		3.2 NAME		46 01 1		
STREET ADDRESS	9157 B SW 5TH ST 3.		3.3 STREET	TADDRESS 6	904 SW 11th Street		ļ
CITY-ST-ZIP	BOCA RATON FL 33428 3.		3.4. CITY+5	ST-ZIP	Sona (Raton, Fl. 33433.		
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME	•		4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE			5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				ļ
STREET ADDRESS			5.3 STREE	TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME				
STREET ANDRESS			6.3 STREE	TADDRESS			]

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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP