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

DOCUMENT # P93000058349

THIN KING, INC.

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90110 050 ***150.00

Principal Place of Business			Mailing Address				1 100 1100 1 110 (0100 11)11 00111 00111 00111 0110 1110 1110 1110 1110 1110 1110 1110 1110 1110 1110 1110 1110
1201 S. ATLANTIC AVENUE			1201 S. ATLANTIC AVENUE				
DAYTONA BEACH FL 32118			DAYTONA BEACH FL 32118				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualifed
							08/16/1993
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For
21			26				59-3198519 Not Applicable
Suite; Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired 5. Serviced 5. Service
22			27				Fee Keduled
City & State			City & State				6. Election Campaign Financing \$5.00 May Be
23			Zip Country				Trust Fund Contribution Added to Fees
Zip Country 24 25		-	— — — — ·				8. This corporation owes the current year.Intangible Personal Property Tax. Yes \(\square\) Yes
24	9. Name and Address of Curren	29 t Regist		30	Γ		10. Name and Address of New Registered Agent
	3. Marile and reduces of Carren	1110910			81	Name	
HAN:	SEN, JOHN C						Johnson (D.O. Davidson in Not Accountable)
1201 S. ATLANTIC AVENUE					82	Street Ac	ddress (P.O. Box Number is Not Acceptable)
DAYTONA BEACH FL 32118					83		
		· 1			إيا		85 Zip Code
					84	City	FL
agent. I a	to the provisions of Sections 607.050; egistered agent, or both, in the State in familiar with, and accept the obligat	2 and 60 of Florid tions of,	07.1508, Florida Statute la. Such change was au Section 607.0505, Flor	s, the authorized ida Stat	bove d by utes	e-named co the corpora	orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ager	nt and title i	if applicable. (NOTE:	Registered	1 Agen	t signature req	uired when reinstating) DATE
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		☐ DELETE	1.1 1	TLE		☐ Change ☐ Addition
NAME	HANSEN, JOHN C			1.2 NAME			
STREET ADDRESS	1201 S. ATLANTIC AVENUE			1.3 STREE		ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL 32118			1.4 CITY-S		T-ZIP	
TITLE	D		☐ DELETE	2.1 TI	2.1 TITLE		☐ Change ☐ Addition
NAME	HANSEN, BARBARA J			22 NAME			**
STREET ADDRESS	201 O. AIDATIO MENOE		2.3 S	TREET	ADDRESS	and the second s	
CITY-ST-ZIP	DAYTONA BEACH FL 32118			NTY-S	T-ZIP	☐ Change ☐ Addition	
TITLÉ			☐ DELETE	3.1 T		į	C) Change C Accident
NAME				3.2 N			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP	*			3.4. C	ITY-S	T-ZIP	☐ Change ☐ Addition
TITLE				4.11		- 1	,
NAME						ADDRESS	
STREET ADDRESS						i i	
CITY-ST-ZIP			☐ DELETE	4.4 C	πγ₊ <u>s</u> m e	-21	Change Addition
TITLE	Į		G, 000010	5.2 N]	2 ,
NAME						ADDRESS	
STREET ADDRESS				- 1	TY-S		
CITY-ST-ZIP TITLE			☐ DELETE	6.1 T			☐ Change ☐ Addition
NAME	1			6.2 N	AME		
STREET ADDRESS						ADDRESS	
OTTY OF TO					TY-S		

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: 10th

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

march 20, 1889

904-21-2-1457

Daytime Phone #