FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 9:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000009066 (9)**

1. Corporate Name
KX IMPORTS INCORPORATED

Principal Place of Business
5101 LESHER CT
TAMPA FL 33624

Mailing Address
5101 LESHER CT
TAMPA FL 33624

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **02/04/1994**
3a. Date of Last Report:

2. Principal Place of Business
21 12505 Hiddenbrook Dr
22 Suite, Apt. #, etc.:
23 City & State: Tampa, Fla
24 Zip: 33624
25 Country: USA

2a. Mailing Address
26 12505 Hiddenbrook Dr
27 Suite, Apt. #, etc.: 7
28 City & State: Tampa, Fla
29 Zip: 33624
30 Country: USA

4. FEI Number: 59-3233632 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.052 Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CAPITAL CONNECTION, INC.
417 E VIRGINIA ST
SUITE 1
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL**
85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 617.0502, 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

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **FRY, THOMAS K**
STREET ADDRESS **5101 LESHER CT**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1) TITLE ☒ Change ☐ Addition
1) NAME
1) STREET ADDRESS 12505 Hiddenbrook Dr
1) CITY-ST-ZIP Tampa, Fl 33624

2) TITLE ☐ Change ☐ Addition
2) NAME
2) STREET ADDRESS
2) CITY-ST-ZIP

3) TITLE ☐ Change ☐ Addition
3) NAME
3) STREET ADDRESS
3) CITY-ST-ZIP

4) TITLE ☐ Change ☐ Addition
4) NAME
4) STREET ADDRESS
4) CITY-ST-ZIP

5) TITLE ☐ Change ☐ Addition
5) NAME
5) STREET ADDRESS
5) CITY-ST-ZIP

6) TITLE ☐ Change ☐ Addition
6) NAME
6) STREET ADDRESS
6) CITY-ST-ZIP

14. I the undersigned certify that the information supplied with this filing [illegible] qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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.

SIGNATURE: Thomas K Fry, Pres. Thomas K. Fry 5-1-95 813-960-0684

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #