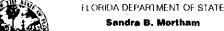
## . File now: filing fee after may 1st is \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 1998 DOCUMENT # 1. Corporation Name



Secretary of State DIVISION OF CORPORATIONS

P94000046645 (5)

K. O. PROMOTIONS, INC.

APPROVELI AND 98 APR 20 AM 10: 44 SECRETARY OF STATE TALLAHASSEE, FLORIDA



	<u> </u>						}    4  1
Principal Place of Business Mailing Address						(14 6166) 6111 (46)	
			PAUL RUSSELL R				
TALLAHASSE	E FL 32301	TALLA	TALLAHASSEE FL 32301			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						06/22/1994	
2. Principal P	lace of Business	2a, Mai	ling Address			4. FEI Number	Applied For
21		26	26			59-3258757	Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			¢0 -	75 Additional
22		27	27			I b Collings of Status Degree I I	e Required
City & State		Cily	City & State			6. Election Campaign Financing \$5.	00 May Be
23		28	28			Trust Fund Contribution Added to Fees	
Zip Country		Zip.	·1 }1		ry	This corporation owes or has paid the current year Intangible	
24	25	29	30			Personal Property Tax due June 30. Y Yes No	
	9. Name and Address of Curre	nt Registered	I Agent			10. Name and Address of New Registered Agent	
	KINSON-HAZELTON, GERI			8	1 Name		1
1300 PAUL RUSSELL RD N					2 Street Ac	Street Address (P.O. Box Number is Not Acceptable)	
TA	LLAHASSEE FL 32301						
				8	3		
				6	4 City	<b>■</b> 85	Zip Code
						<b>FL</b>  _	
office or re	to the provisions of Sections 607.00t oglstered agent, or both, in the State m familiar with, and accept the oblig	uz and 607. It e of Florida Si ustions of Sec	uch change was sion 607 0505. FI	ies, the abc authorized orida Statut	ive-named co by the corpo	orporation submits this statement for the purpose of changination's board of directors. I hereby accept the appointmen	ng its registered t as registered
=	The territor with and the control of the	ganona or, coc	100 000 0000, 11	Ontia Diata	00.		
SIGNATURE	Signature, typed or presed hance of registered ag	pot and site if appli	entile (NO	It Registered A	gent signature re	quired when reinstating) DATE	
12.	OFFICERS AN	ND DIRECTOR	S	13.		ADDITIONS/CHANGES TO OFFICERS AND DIREC	TORS IN 12
TITLE	DPS		DELETE	1.1 1/11/		☐ Char	ige 🔲 Addition
NAME HAZELTON, DONALD F			1.2 NAME		E	8000024951289	
STREET ADDRESS 1300 PAUL RUSSELL RD N			1.3 STREET ADDRESS		ET ADDRESS	-04/21/9801047012	
CITY-SI-ZIP TALLAHASSEE FL 32301				1.4 CITY-ST-ZIP		****150.00 *****150.00	
TITLE	DVT		DELETE	2.1 1111		Char	S S O Addition
NAME ATKINSON-HAZELTON, GERI			2.2 NAME		-		
STREET ADDRESS 1300 PAUL RUSSELL RD N			2 3 STREET ADDRESS		- 1		
CITY-ST-ZIP	TALLAHASSEE FL 32301		- D SELETE		'- \$1 - ZIP		
TITLE			DELETE	3.1 111(6	ŀ	L_J Chan	nge L Addition
NAME				3.2 NAM	·		
STREET ADDRESS					ET ADDRESS		
CITY-ST-ZIP			DECETE		- ST- ZIP	Chan	nge Addition
TITLE			TT neres	4.1 TITLE		□ Chan	ige LT Addition
NAME CTREET ADDRESS			4. 2 NAME		·		1
STREET ADDRESS	J.			4.3 STREET ADDRESS 4.4 CRY-ST-ZIP			ļ
CITY-ST-ZIP TITLE			DELETE	5.1 TITLE		☐ Chan	ge Addition
NAME			L_ Deltat		ŀ	Clian	ião 🗂 Viguilion
1				52 NAM	1		
STREET ADDRESS					ET ADDRESS		
CITY-ST-7IP TITLE			DELETE	5.4 CITY 6.1 TITLE		☐ Chan	ae Addition
NAME			C) PECEL	6.2 NAM	Į.	<del></del>	Pio FT Variabil
STREET ADDRESS					ET ADDRESS	Le ulon	

CITY-ST-ZIP 6.4 CHY+S1-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 supplienental annual report is true and accurate and that my signature shall have the same logal effect as if made under early that I am an officer or director of the corporation of 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 attrictiment with an address.

Attingin Joakin