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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400087776 (8) KINGSTABLE INTERNATIONAL. INC.

Country

9. Name and Address of Current Registered Agent

25

MERCURIO, JOHN J 713 S ORANGE AVE

Principal Place of Business 713 8 ORANGE AVE

2. Principal Place of Business

SARASOTA FL 34236

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

22

23

24

Zip

Mailing Address

713 S ORANGE AVE SARASOTA FL 34236

2a. Mailing Address

City & State

27

28

29

Suite, Apt. #, etc.

FILED May 08 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

П

Yes Yes

941 - 453-4518

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□ No

Not Applicable

3. Date Incorporated or Qualified

12/02/1994 FEI Number

65-0557694

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

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

SARASOTA FL 34238			1	
		63	7	83
}		84	╁	84 City 85 Zip Code
			1_	<u> </u>
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	Signature, typed or profiled name of registered agent and little if applicable (NOTE Re-	islered An	eni	Agent signature required when (einstating) DATE
12.	OFFICERS AND DIRECTORS	13.	,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD DELETE	1.1 TITLE		LE Change Addition
NAME	MURRAY, MICHAEL J	1.2 NAME		ME
STREET ADDRESS	5 FIVE OAKS CLOSE SEABRIDGE	1.3 STREE	TAE	REET ADDRESS
City-St-ZW	NEWCASTLE-UNDER-LYNN, STAFFS	1.4 CITY-:	ST-	Y-ST-ZIP
TITLE	SD DELETE	21 TITLE		LE Change Addition
NAME	BAGNALL, ROBIN A	2.2 NAME		ME
STREET ADDRESS	5 FIVE OAKS CLOSE SEABRIDGE	2.3 STREE	T AE	REET ADDRESS
CITY-\$T-ZIP	NEWCASTLE-UNDER-LYNN, STAFF	2. 4 CITY-	-ST-	TY-ST-ZIP
TITLE	DELETE	3.1 TITLE		LE Change Addition
NAME		3.2 NAME		ME !
STREET ADDRESS		3.3 STREE	TAI	REET ADDRESS
CITY-ST-ZIP		3.4. CITY-	ST-	TY-ST-ZIP
TITLE	☐ DELETE	41 TITLE		LE Change Addition
NAME		4. 2 NAME		ME
STREET ADDRESS		4.3 STREE	T AC	REET ADDRESS
CITY-ST-ZNP		4 4 CITY-	ST-	
TITLE	DELETE	5.1 TITLE		- 1
NAME		5.2 NAME		ME
STREET ADDRESS		5.3 STREE	T AE	REET ADDRESS
CITY-ST-ZIP		5.4 CITY-1	ST-	
TITLE	☐ DELETE	6.1 TITLE		LE Change Addition
NAME		6.2 NAME		ME
STREET ADDRESS		6.3 STREE	T AI	REET ADDRESS
CITY-ST-ZIP		6.4 CITY-		
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 suppliemental 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.				

Country

81 Name

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