FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

P95000034045 (1)

DOCUMENT # P9!

1. Corporation Name

KINGS HIGHWAY OIL INC.

1111400	THORITY CIE, MO				
Principal Place of	of Business	Mailing Address		I	I BOUR OUTDE TIER DIDIT ANIEL BLOCK BIR 1881
1905 SOUTH 25TH STREET SUITE 206 FORT PIERCE FL 34947		1905 SOUTH 25TH STREET SUITE 206 FORT PIERCE FL 34947			
				3. Date Incorporated or Qualified 05/01/1995	3a. Date of Last Report N/A
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
	North County Road		County Road	65-0588409	Not Applicable
Suite, Apt. #	, etc.	Suite. Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 Palm Beach		City & State		6. Election Campaign Financing Trust Fund Contribution	□ \$5.00 May Be Added to Fees
Zip Palm	Country	28 FL Zip	Country	8. This corporation has liability/or	
24 33480	├ ──ŋ	29 33480	30 USA		s 🔲 No
35400	9. Name and Address of Curren			10. Name and Address of New	Registered Agent
			81 Name	* * * *L	
	RICHARD D'UR		82 Street Addr	A. List ess (P.O. Box Number is Not Accepta	ble)
1905 SOUTH 257A STREET			138 No	rth_County_Road	
	06, MARDI EXECUTIVE CENTER		83	-	
FT. PIER	C#FL 34947		84 Palm B	e a a b	Fi 85 Z33480
/					
or registere	ed agent, or both, in the State of Florio	da. Such change was authors	zed by the corporation's boar	ation submits this statement for the p rd of directors. Thereby accept the ap	urpose of changing its registered office pointment as registered agent. I am
familiar with	n, and accept the of the bigs of Sect	on 607.0505, Florida Statute:	S.		31,5191.
SIGNATURE	-11/11	ு வகர்ணைப் பிக	anit Regeleced Agent system α γενί	Indiana Adam	7/13/10
12.	Signature: Typied or priors tinairse of regist ate d agost OFFICERS ANi		13.		FICERS AND DIRECTORS IN 12
TITLE	PRESIDENT	DELETE	1 1 THEF		Change Addition
NAME	MARTIN A. LIST		1.2 NAME		
STREET ADDRESS	138 NORTH COUNTY I	ROAD	1.3 STREET ADDRESS		
CITY - ST - ZIP	PALM BEACH FL 334		1.4 CITY - ST - ZIP		
TITLE		DELETE	2 131115		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - 2IP		FT DV. FIC	2.4 C(TY - ST - Z)F		☐ Change ☐ Addition
TITLE		DEFELE	3 1 T-TLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4 CITY - S1 - 7iP 4.1 THUE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY ST-ZIP		
TITLE		DELETE	5 1 TILLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STHEET ADDRESS		
CITY-ST-ZIP			5.4 CHY - \$1 - 7/P		
TITLE		☐ DELETE	6 1 T TLF		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZiP		0.070(1) [1.14.0]
certify that oath; that	the information indicated on this ann	ual report or supplemental an oration or the receiver or trust	nual report is true and accura ee empowered to execute th	for the exemption stated in Section 11 ate and that my signature shall have th is report as required by Chapter 607,	ie same legal effect as it made under

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/96

1076559150

Daytin e Phone #