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

PROFIT CORPORATION ANNUAL REPORT



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

AMMORETICE	O 11
1996	

DOCUMENT #

P95000043597 (0)

Corporation Name KNIGHTSBRIDGE INVESTMENT CORPORATION

Mailing Address Principal Place of Business 438 ST ARMANDS CIRCLE 438 ST ARMANDS CIRCLE SARASOTA FL 34236 SARASOTA FL 34236



3a. Date of Last Report

3. Date Incorporated or Qualified

05/30/1995

	2a. Mailing Address				4. FEI Number	L	plied For
2. Principal Place of Business	Suite, Apt. #, etc.					No	t Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 A	I
	27				6. Election Campaign Financing	\$5.00	May Be
City & State	City & State		Trust Fund Contribution	Added t			
	28 Zip	Country			8. This corporation has liability for intangible	e tax under s 1	99.032,
Zip Country	├ ─ `	30			Florida Statutos Yes 🗹 No)	
1 25	29 Agent	[30]	[30]		10. Name and Address of New Register	ed Agent	
9. Name and Address of Curren	negistered rigorit		81	Name			
ROBINSON, RICHARD			82 Street Addr		oss (P.O. Box Number is Not Acceptable)		
438 ST ARMANDS CIRCLE		ļ	83				
SARASOTA FL 34236			85 Zip Code				Code
			84	City		FL	
11. Pursuant to the provisions of Sections 607.0502		to the abo		noned corpor	ation submits this statement for the purpose of	I changing its re	gistered office
familiar with, and accept the obligations of, Sect	ion 607.0505, Florida Stal	itutes.					
SIGNATURE Signature, typed or printed name of registered agent	and tille if applicable		l Agen	nt signature require	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
	D DIRECTORS	13.			ADDITION OF THE PARTY OF THE PA	Change	☐ Addition
100 10 010/1	☐ DETELE						
NAME ROBINSON RICH ASSET ASSET AND ASSET A	INRD	1.2 N					
STAFEL ADDRESS 438 STARMANDS	CIRCLE	1.3 S	TREET	I ADDRESS			
	4236 1401Y-SI		ST-719		Change	Addition	
THE SWANSON / ST	☐ DELETE	LETE 2 1 THILF		Į			
		221	IAMī	ļ			
NAME		235	STREE	1 ADDRESS			
STREET ADDRESS	DELETE						T Addition
CITY-ST-ZIP			3 1 1.TLE 32 NAME			☐ Change	■ Addition
TITLE							
NAME		33	STREE	ET ADDRESS			
STREET ADDRESS				-S1- 7 (P			
City-St-7iP						Change	☐ Addition
TITLE			THILE	Y			
NAME				ET ADDRESS			
STHEET ADDRESS							
CITY-ST-ZIP	ED BEIEF		CHY- TITLE	- \$1 - 7IP	300001785 -04/22/9601038	s ⊏: 🗗 Grange	Addition
TITLE	□ DELET	1		Service 1	04/22/00==01020	006	
NAME			NAMI	part of	-04/22/3001030	555	
STREET ADDRESS		and the second		ET ADDRESS	***200.00		
City-St-ZiP				- ST - ZIP		Change	Addition
TITLE	☐ DELE		6 1 TITLE				
NAME			NAM ?				
STREET ADDRESS		6	3 STRE	EET ADDRESS			
		6.	4 CITY	1-SI-11P	of the section of the section 110 07/9	(/k) Florida Stat	utes. I further
City-SI-ZIP 14. I do hereby certify that the information supplied certify that the information indicated on this are oath; that I am an officer or director of the papears in Block 12 or Block 3 if changes.							
SIGNATURE.	OR PRINTED NAME OF SIGNIN	IG OFFICER OR DIF	ECTO	IAR)	ROBINSON 3/	Daytore Prior	88/8/