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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P95000056487

BIRD KING, INC.

Principal Place of Business

Mailing Address

5211 W BEAVER ST

5211 W BEAVER ST

FILED Jan 30 1997 8:00am Secretary of State



BUONSOUTHER	. TE OELOT	ANOUGOMAINTE LE 255	JYEOIU						
					3. Date Incorporated or Qualified				
2. Principal Pla	2a. Mailing Address	/ess			4. FEI Number	1	Ar	oplied For	
21	26				59-3337808		No.	ot Applicable	
Suite, Apt. #, etc. Suite, Ap			ot #, etc.			5. Certificate of Status Desired			Additional
22		27				ur continue of charas position	<u></u>	Fee Re	equired
City & State		City & State	Ի			6. Election Campaign Financing			May Be
23		28			_,	Trust Fund Contribution	<u> </u>		to Fees
Zip	Country	Zip	h	ountry	•	8. This corporation has liability for i			. 199.032,
24	25	29	30				Yes _		
nne	9. Name and Address of Curr	ent Registered Agent		81	Name	10. Name and Address of New Re	gistered A	gent	***************************************
BROWN, ELAINE					Name				
4595 LEXINGTON AVE					82 Street Address (P.O. Box Number is Not Acceptable)				
JAC	KSONVILLE FL 32210					<u>,</u>	· · · · · · · · · · · · · · · · · · ·		
				83					
				84	City		EI	85 Zip	Code
11 Duran cont to	the convinces of Sections 607.0	502 and 607 1508 Florida State	des the	above	named cor	noration submits this statement for the o	wroose of	changing i	te registered
office or reg agent. I am	gistered agent, or both, in the Sta i familiar with, and accept the obli	tte of Florida Such change was agations of, Section 607.0505, F	authoriz Iorida St	ed by	the corpora	poration submits this statement for the pation's board of directors. I hereby acceptions	of the appo	intment as	registered
SIGNATURE	on sture typed or principles and broadened.	word and title 1 appropriate (NC	TE Registe	red Aoe	ent signature requ	pired when reinstating)	DATE		
12.		AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFIC		DIRECTOR	1S IN 12
TILE	Р	☐ DELETE	1.1	TITLE				Change	☐ Addition
NAME	Franklin, Paul		12	NAME					
STREET ADDRESS	1263 LAKE SHORE BLVD				ADDRESS				
	JACKSONVILLE FL 32205			CITY - S					
CHY-ST-7/F Title	S	DELETE		TITLE	51 · ZIF			Change	Addition
NAME	FRANKLIN, ELIZABETH			NAME	1		•		
	1263 LAKE SHORE BLVD				ADDRESS				
STREET ADDRESS	JACKSONVILLE FL 32205				Ī				
CITY-ST-ZIF	WONDONNIEL I L'OLLOS	DELETE		2 4 CITY - ST - ZIP 3.1 TITLE				Change	Addition
THILE		☐ NCTCIE	1		1			Ondings	FAGUITORI
NAME				NAME					
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP	····	T DELEVE		. CITY -	ST-21P			Character	
TITLE		☐ DELETE	1	TITLE	}			Change	Addition
NAME			4.	2 NAME					
STREET ADDRESS			4.3	STREET	ADORESS				
CITY - ST - 21P			4.4	CITY-S	ST-ZIP				
TITLE		DELETE	5.1	TITLE				Change	Addition
NAME			5.2	NAME					
STREET ADDRESS			5.3	STREET	ADDRESS				
CHTY - ST - ZIP			5.4	CITY-5	ST-ZIP				
TIFLE	74, 74, 74, 74, 74, 74, 74, 74, 74, 74,	DELETE		TITLE				Change	☐ Addition
NAME			1	NAME				-	
STREET ADDRESS					ADDRESS				
			1	CITY-S					
0 TY-SI-7-2	exitify that the externation curve	lind with this filing does not aus				ed in Section 119 07(3)(i) Florida Statute	e I further	certify that	the

I have an officer or director of the corporation or the receiver or frustee 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.