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 # P95000095339 (4)

KNIGHT'S HAVEN INC

Principal Place of Business	Mailing Address
1200 NORTH FEDERAL HIGHWAY, STE. 411 BOCA RATON FL 33432	1200 NORTH FEDERAL HIGHWAY, STE. 41 BOCA RATON FL 33432

FILED Feb 23 1998 8:00am Secretary of State

MMOIT	O TIMPLIN, INC.					
Principal Place	e of Business	Mailing	Address			9511 95 51 0 1919 1 9 15 94 141 98 11119 1841 1841
1200 NORTH FEDERAL HIGHWAY. STE. 411 1200 NORTH FEDERAL HIGH		HWAY STE 411				
BOCA RATON FL 33432 BOCA RATON FL 33432		411111. O.C. 411				
						TE IN THIS SPACE
					3. Date Incorporated or Qualified	ı
9 Principal P	lace of Business	2a Mai	lling Address		12/14/1995 4. FEI Number	Applied For
21	dog of bosiness	26	mig radioss		65-0630126	Not Applicable
Suite, Apt.	#, etc.		te, Apt. #, etc.			60.75
22		27			5. Certificate of Status Desired	Fee Required
City & State	9	City	& State		6. Election Campaign Finanding	\$5.00 May Be
23		28			Trust Fund Contribution 1	Added to Fees
Zip	Country	Zip	⊢	Country	8. This corporation owes or has p	
24	25 9. Name and Address	ef Courset Besisters		<u> </u>	Personal Property Tax due Jur 10. Name and Address of New F	
541		or current negistered	a Agent	81 Name		Paristerad Wilaut
	(MOND, JOHN J JR.	N. H. L.		1	Forbes, Philip H.	
	O NORTH FEDERAL HIG	HWAY, SIE. 411			ddress (P.O. Box Number is Not Accepte	
BOCA RATON FL 33432 1200				200 North Federal	dighway	
					uite 411	
				84 City	ca Raton	FI 85 Zip Code
11. Pursuant t	to the provisions of Section	s 607.0502 and 607.19	508, Florida Statutes		orporation submits this statement for the oration's board of directors. I hereby acc	purpose of changing its registered
office or re	egistered agent, or both, in m familiar with, and accept	the State of Florida, S	uch change was au stion 607,0505, Flori	thorized by the corpo	pration's board of directors. I hereby acc	ept the appointment as registered
	Im 1	1700		da Giaidico.	•	1/28/53
SIGNATURE	Signature, typed or printed name of r	egistered agent and tille if appl	licable. (NOTE:	Registered Agent signature n	equired when reinstating)	DATE
12,		CERS AND DIRECTOR	1.1.	13.	ADDITIONS/CHANGES TO OFF	
TITLE	D		DELETE	1.1 TITLE		Change
NAME	KLEINKNECHT, PETE	RJ Brandersen de	Δ.	1.2 NAME		
STREET ADDRESS	20 QUARRY PATH	160 KBET KI	<i>E</i> 2.0.0	1.3 STREET ADDRESS	960 REEF RD	32963
CITY-ST-ZIP		ERO BEACH	DELETE	1.4 CITY-ST-ZIP	VERD BEACH FL	
TITLE	D D	NECAL .	L DELETE	2.1 TITLE		Change Addition
NAME	KLEINKNECHT, MAUF 2 2 GUARRY-PATH	960 REEF	CO	2.2 NAME	Our Deve An	
STREET ADDRESS	STONINGTON-CT	VERO BEAG		2.3 STREET ADORESS	960 REEF RD VERO BEACH FL	32963
CITY-ST-ZIP TITLE	OTOTMITOTOTI-UI	THE CENT	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	TERU BEACH OF -	Change Addition
NAME				3.2 NAME		El charge El riblicon
STREET ADDRESS				3.3 STREET ADDRESS		
CITY-ST-ZIP				3.4. CITY-ST-ZIP		
TITLE		·	DELETE	4.1 TITLE		Change Addition
NAME				4. 2 NAME		
STREET ADDRESS	•			4.3 STREET ADDRESS		
CITY-ST-ZIP				4.4 CITY-ST-ZIP		
TITLE			DELE TE	5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET ADDRESS		
CITY-ST-ZIP				5.4 CITY-ST-ZIP		
TITLE			DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREET ADDRESS		
CITY-ST-ZIP	netification that is to meet		dans not evialle :	6.4 CITY+ST-ZIP	in Continue 410 07/04/0 First Paris	I found the second of the second of
indicatéd (on this annual report or sue	elemental annual rend	ort is true and accur	ate and that my sion:	in Section 119.07(3)(i), Florida Statutes, ature shall have the same legal effect as equired by Chapter 607, Florida Statutes	if made under oath; that I am an

1/2 /95