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 # P9600007620 (3)

KNIGHT-CINTRON, INC.

FILED Apr 10 1997 8:00am Secretary of State



Principal Place of Business 2248 SE BOWIE ST PORT ST LUCIE FL 34952		Mailing Address 2248 SE BOWIE ST PORT ST LUCIE FL 34952-6907			(1001100) (110 13110 31111 34111 00111 00111 00111 0	* (169 (106) 116 (97)0 31)11 39)11 80111 80111 80111 80()) (00)0 81)18 11(6) 38() (00)		
1011 01 2001	. TE VIWE	TOTAL OF COME TE STAN	- 1007		3. Date Incorporated or Qualified 01/22/1996	3a. Date of Last	Report	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	1	Applied For	
21 /9/85	F POST ST. LUCIE KUD.	26 1918 SE PORT S	ST. ZUC	IE BLU	n 65-0638385	65-0638385 Not Applicable		
Suite, Apt 1	#, etc	Suite, Apt. #, efc.					\$8.75 Additional Fee Required	
City & Stat∈					6. Election Campaign Financing	\$5.00 May Be		
23 PORT S	T. LUCIE, FL 28 POAT ST. LUCIE, Country Zip Cour			FL	Trust Fund Contribution		to Fees	
	- h	Zip			B. This corporation has liability for inte	angible tax	s. 199.032,	
24 3495	52 25 USA	29 34952	30 (SA		Yes No		
	9. Name and Address of Current I	Registered Agent		Name	10. Name and Address of New Regis	stered Agent		
HARRISON, STEPHEN R 2248 SE BOWIE ST PORT ST LUCIE FL 34952 82 Street Address (P.O. Box Number is Not Acceptable) /9/8 SF PORT ST. LUCIE FL 84 City PORT ST. LUCIE FL 85 Zip Code 3 495 2 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) Code 4952	
office or registered aggnt, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and editional state of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and editional state of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with a such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with a such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with a such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with a such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with a such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with a such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with a such change with a such change with a such change with a such change was a such change with a such change was a such change with a such chan								
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE			
THILE	D LADDICON CTEDUEN D	☐ DELETE	1.1 JUL		0/9/1	Change	Addition 6	
NAME	HARRISON, STEPHEN R 2248 SE BOWIE ST		1.2 NAN		STEPHEN R. HARRISON		l;	
STREET ADDRESS	PORT ST LUCIE FL 34952		1.3 \$TA	EET ADDRESS	1918 SE PORT ST. LUCIE BL	. 00	ļi	
City-S1-ZiP	D LOUIE PL 34802			(-ST-ZIP	PORT ST. LUCIE, FL 349			
TITLE	•	☐ DELETE	2.1 1111	ŧ	D/S	Lea Change	Addition C	
NAME	HARRISON, MERCY 2248 SE BOWIE ST		2.2 NA	1E	MERCY HARRISON 1918 SE PORT ST. LUCIE BLU	iD.		
STREET ADDRESS	PORT ST LUCIE FL 34952				1918 SE PORT SI. LUCIE 1520	,,,	1	
CITY - ST - 7H	FURI SI LUCIE FL 34832	T API STC		Y-ST-ZIP	PORT ST. LUCIE, FL 3495			
TITLE		☐ DELETE	3.1 TITL			Change	Addition	
NAME			3.2 NAM				1	
STREET ADDRESS			3.3 STR	EET ADDRESS			-	
CHY-ST-7IP		LIBRITA		Y-ST-ZIP				
TITLE		☐ DELETE	4.1 TITE			Change	Addition	
NAME			4, 2 NA				-	
STREET ADORESS			4.3 STR	EET ADDRESS				
CITY+ST+7IP				r-ST-ZIP			1.750	
TITLE		☐ DELETE	5.1 1111			Change	Addition	
NAME			5.2 NAM					
STREET ADORESS			5.3 STR	EET ADDRESS				
CHTY-ST-ZIF			5.4 CIT	r-ST-ZIP				
TOTALE		☐ DELETE	6.1 TITE	E		☐ Change	Addition	
NAME			6.2 NAM	λE				
STREET ADDRESS			6.3 STR	EET ADDRESS				
CITY-S1-ZIF				1 - ST - ZIP	,			
14. I do heret	by certify that the information supplied	with this filing does not qua	lify for the e	xemption s	stated in Section 119 07(3)(i), Florida Statutes.	I further certify the	at the	

information indicated on this annual report or supplemental 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 chapted by on an attachment with an address.

SIGNATURE: