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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 POCUMENT # P96000020441 (7)

KNIGHT GEAR, INC.

FILED May 08 1997 8:00am Secretary of State

407



Principal Place	a or positiess	Mai	ing Address				1 100,400		. 45111 61	Leid 14811 8811		PP 7181 7891	
200 S. ORANGE ORLANDO FL 3	E AVE., STE. 2300 12801	200 S. ORANGE AVE., STE. 2300 ORLANDO FL 32801-3440											
							3. Date Inc 03/04/	orporated or Qualifi	ied	3a. Date	of Last I	Report	
	lace of Business	2a. I	2a. Mailing Address				4. FEI Num	ber .				applied For	
21		26	_								lot Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certifical	te of Status Dosired	ı [;		Additional Required	
City & State			City & State				1	Campaign Financin nd Contribution	٠.		\$5.00 May Be Added to Fees		
Zip	Country 25				ountry		6. This corporation has liability for intangible tax under s. 199.032. Florida Statutes						
84	9. Name and Address of Curre		red Agent	1901	Т			nd Address of Nev					
PERI	EZ, H.A. TICO				81	Name							
200	S. ORANGE AVE., STE. 2300				82	Street	Address (P.O. Box N	Number is Not Acce	ptable)			
OHL	ANDO FL-32801				83			the control of the co					
					84	City				FL	35 Zip	Code	
11. Pursuant i office or re agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	02 and 60 e of Florida galions of,	7.1508, Florida Statu 1. Such change was Section 607.0505, F	utes, the authoriz forida St	abovi ed by latutes	c-named the con	d corporation submits poration's board of c	s this statement for t lirectors. I hereby a	the pur ccept t		anging tment a	its registered s registered	
SIGNATURE													
12.	Signature, typind or printed name of registried at OFFICERS At			Tt - Registe		nt signature	e required when reinstating) ADDITION	S/CHANGES TO O	EFICE	DATE OMA 25	RECTO	BS IN 12	
file file	D OFFICENS AF	NO DIRECT	DELETE		TITLE		T ADDITION	15/01/ANGES TO 0	TTIOL		Change		
NAME	PEREZ, H.A. TICO			1.2	NAME							_	
STREET ADDRESS	200 S. ORANGE AVE., STE. 2	300		1.3	STREET	ADDRESS							
CITY-ST-ZIP	ORLANDO FL 32801			1.4	CITY-S	1 - ZIP							
TITLE	D		☐ DELETE	2.1	TITLE						Change	Addition	
NAME	PYNN, ROGER				NAME								
STREET ADDRESS	200 S. ORANGE AVE., STE. 2	2300		•		ADDRESS							
CITY-ST-ZIP	ORLANDO FL 32801		DELETE		CITY - :	S1 - 21P				·	change	Addition	
NAME			W oter it		NAME						Orizingo		
STREET ADDRESS	- MACE, WINDOON -					ADDRESS :							
CITY-ST-ZIP	COLANDO TE OZDOT			- 1	. CITY-S								
TITLE			DELETE		TITLE					L	Change	Addition	
NAME				4 2	NAME								
STREET ADDRESS				43	STREET	ADDRESS							
CITY-ST-ZIP			DELLIE		CHY-S	I - ZIP					Chanai	Balaint	
TITLE			☐ DELETE		TITLE					<u> </u>	Change	Addition	
NAME OTRECT ADDRESS					NAME	ADDDCCC							
STREET ADDRESS CITY-ST-ZIP					CITY - S	ADORESS							
TITLE			DELETE		TITLE	1-215	 				Change	Addition	
NAME					NAME	,						_	
STREET ADDRESS	•					ADDRESS							
CITY-ST-ZIP					CHY-S								
	ov certify that the information supplied	ed with this	titico does not qua				stated in Section 119	.07(3)(i). Florida Sta	itutes.	I further ce	ertify tha	it the	

Information indicated on this annual report of supplemental annual and a courage and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the correlation or the receiver or trustee en powered 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.