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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000064518 (9)

KING'S ROYAL SERVICES, INC.

FILED Jan 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 61 DELMAR FT. MYERS BEACH FL 33931 FT. MYERS BEACH FL 33931 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/01/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 26 65-0694290 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 29 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent SHENKO, WILLIAM E JR 2801 ESTERO BLVD., SUITE C 82 Street Address (P.O. Box Number is Not Acceptable) FT. MYERS BEACH FL 33931 83 84 Zip Code 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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stgnature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE 1.1 TITLE Change TITLE NAME KING, JAMES F 1.2 NAME STREET ADDRESS 61 DELMAR 1.3 STREET ADDRESS FT. MYERS BEACH FL 33931 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change ☐ Addition NAME 2,2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS City-St-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITI F 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS City - St - 7/P 4.4 CITY - ST - 7IP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that 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 changed, or enan attachment with an address.

ALLED FIXER

SIGNATURE.

1-6-98 941-463-7565

(10/97