

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90047 028 ***150.00

1. Entry Name
KINGSLY HOLDING CORP.

Principal Place of Business	Mailing Address
1 SE 3RD AVE 28TH FL MIAMI FL 33131 US	1 SE 3RD AVE 28TH FL MIAMI FL 33131-1715 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State

Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
65-0720273	Not Applicable

5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	

6. Name and Address of Current Registered Agent
AMERICAN INFORMATION SERVICES, INC.
1 SE 3RD AVE
28TH FL
MIAMI FL 33131

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida

SIGNATURE _____ (NOTE: Registered Agent signature required when necessary) DATE _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so (See criteria on back) ☐
10. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DPS	☒ Delete	TITLE	DPST	☐ Change ☒ Addition
NAME	LOPEZ, A		NAME	LOPEZ MORALES, AGUSTIN	
STREET ADDRESS	1 SE 3RD AVE, 28TH FL		STREET ADDRESS	1 SE 3RD AVE, 28TH FLOOR	
CITY - ST - ZIP	MIAMI FL 33131		CITY - ST - ZIP	MIAMI, FL 33131	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 807, Florida Statutes, and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Agustin Lopez Morales 4/27/00 (305) 3745000 (Ext. 4691)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone #