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

**PROFIT CORPORATION** ANNUAL REPORT

1999



DOCUMENT # **P97000023891**1. Corporation Name

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90078 028 \*\*\* 150.00

KNIGHT	HOLDING INTERNATIONAL,	INC.				
Principal Place	e of Business	Mailing Address				
5056 ULMERTON ROAD 6056 ULMERTON ROAD CLEARWATER FL 34620 CLEARWATER FL 34620						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						03/11/1997
2 Principal P	lace of Business	2a. Mailing Address			·	4. FEI Number Applied For
1		26	1			59-3444021 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required
City & Stat	te	City & State				6. Election Campaign Financing 55.00 May Be
3		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Coun	try		8. This corporation owes the current year Intangible
4	25	29	30			Personal Property Tax. ☐ Yes 🗷 No
<u>-1</u>	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent
				81	Name	
	3, Ricardo a N. Franklin Street		ļ	82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
SUITE 2600			-	83		
TAMPA FL 33602						
			84	City	FL 85 Zip Code	
SIGNATURE	m familiar with, and accept the obligation of familiar with, and accept the obligation of familiar with familiar w	and title if applicable. (NOTE: F				uired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. TITLE	P	DELETE	1.1 TITL	E		☐ Change ☐ Additio
NAME	KNIGHT, JEFFRY	-	1.2 NAN	۸E	Ì	
STREET ADDRESS	6056 ULMERTON ROAD		1.3 STR	REET	ADORESS	
CITY-ST-ZIP	CLEARWATER FL 34620		1.4 CITY			
TITLE	022 410010	☐ DELETE	2.1 TITL			☐ Change ☐ Additio
NAME			2.2 NAM	ИE		
STREET ADDRESS			2.3 STR	REET	ADDRESS	
CITY-ST-ZIP			2.4 CIT	Y-S1	T-ZIP	4
TITLE		☐ DELETE	3.1 TITL	Æ		☐ Change ☐ Additio
NAME			3.2 NAN	ME.		
STREET ADDRESS			3.3 STR	REET	ADDRESS	
CITY-ST-ZIP			3.4. CIT	Y-\$1	T-ZIP	
TITLE		☐ DELETE	4.1 TITL	E		☐ Change ☐ Addition
NAME			4. 2 NA	ME		
STREET ADDRESS	ļ		4.3 STR	REET	ADDRESS	
CITY-ST-ZIP			4.4 CIT		r-ZIP	☐ Change ☐ Additio
TITLE		☐ DELETE	5.1 TITL			☐ Change ☐ Additio
NAME			5.2 NAM		ADDOESS	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		☐ DELETE	5.4 CIT		1-ZIP	. Change Addition
TITLE		□ nere is	6.2 NAM			
NAME					ADDRESS	
STREET ADDRESS			0.0011			

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 on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

(727)524-6125