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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 P97000031074 (2) DOCUMENT #

CAMELOT RESOURCES, INC.

FILED Mar 24 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				- I HORIHARI HIN INIKI HUNIK NUKIK NUKIK NUKIK NUKIK NUKIK NUKIK		
120 LAKESHORE DRIVE. UNIT 1136 120 LAKESHORE DRIVE.			UNIT 1136			
NORTH PALM BEACH FL 33408 NORTH PALM BEACH FL			_ 33408	406 DO NOT WRITE IN THIS SPACE		COACE
					3. Date Incorporated or Qualified	SPACE
					04/07/1997	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			<u>65-0741303</u>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State	<u> </u>	City & State				Fee Required
23	в	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Coun	try	8. This corporation owes or has pald the or	Added to Fees
24	25	29	30	. ,	Personal Property Tax due June 30.	Yes Z No
	9. Name and Address of Curre		1		10. Name and Address of New Registered	<u> </u>
CARRINGTON, KYLE				1 Name		
120 LAKESHORE DRIVE, UNIT 1136			1	2 Street Ac	ddress (P.O. Box Number is Not Acceptable)	
NO	RTH PALM BEACH FL 33408					
			8	3		
			8	4 City		85 Zip Code
	49 007.05	00 100 1500 F			FI	_
office or re	to the provisions of Sections 607.05 egi ste red agent, or both, in the Stati	02 and 607.1508, Florida Sta tuti e of Florida. Such change was a	es, the abo authorized	we-named co by the corpo	prporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its registered pointment as registered
agent. i ai	m familiar with, and accept the obliq	gations of, Section 607. 0505 , Flo	orida Statut	es.	, , ,	,
SIGNATURE	Signature, typed or printed name of registered ag	ean and title if equipments (NOT)	- Ponislared (nont signature re	guired when reinstating) DATE	
12,		ND DIRECTORS	13.	Gen eignature ret	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		100110107011110110711	☐ Change ☐ Addition
NAME	CARRINGTON, KYLE		1.2 NAM	E I		
STREET ADDRESS 120 LAKESHORE DRIVE, UNIT 1136			1.3 STRE	ET ADDRESS]
CITY-ST-ZIP	NORTH PALM BEACH FL 33	1408	1.4 CITY	-ST-ZIP		ĺ
TITLE		DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME			2.2 NAM	E		
STREET ADDRESS			2.3 STRE	ET ADDRESS		
CITY-ST-ZIP			2. 4 CITY			
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME CTREET ADDRESS			3.2 NAM			,
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITLE			☐ Change ☐ Addition
NAME			4.1 IIILE			Li Change Li Audillon
STREET ADDRESS				et address		
CITY-ST-ZIP						
TITLE		DELETE	4.4 CITY			☐ Change ☐ Addition
NAME			5.2 NAME	- 1		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			5.4 CITY	į.		
TITLE		DELETE	6.1 TITLE		1-10	Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STRE	T ADDRESS		ľ
CITY-SY-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 ennual 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.

Kyle Courination, Pres

3/14/98