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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000094978 (8)

FILED Feb 13 1998 8:00am Secretary of State

K.K.'S MARINE CANVAS, INC.				
			T PROGRADI DIA PONT DODIN DODIN ABDIL DORNI DI	PJUB 1810) BIBIS JOHN LEBB 1881 1861
•	Mailing Address			
1 AVENUE A	1 AVENUE A			
FT. PIERCE FL 34960	FT. PIERCE FL 34950		DO NOT WRITE IN	THIS SPACE
			3. Date Incorporated or Qualified	<u> </u>
			11/05/1997	,
2. Principal Place of Business 2	Mailing Address		4. FEI Number	Applied For
21 26		4492		Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc. 1		5. Certificate of Status Desired	\$8.75 Additional
22 27				Fee Required
City & State	FT PIER	ce FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	7 1 1 C 5 1	Country		
24 25 29		60	 This corporation owes or has paid to Personal Property Tax due June 30. 	Yes No
9. Name and Address of Current Reg		<u> </u>	10. Name and Address of New Regist	
FLORIDA INCORPORATORS, INC.		81 Name		
1221 BRICKELL AVENUE		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
SUITE 900		oli	ess (F.O. Box Norman is Not Noodplable)	
MIAMI FL 33131		83		
		84 City		85 Zip Code
				FL
11. Pursuant to the provisions of Sections (i07.0502 and office or registered agent, or both, in the State of Flo	607.1508, Florida Statules	, the above-named corp thorized by the corporati	oration submits this statement for the purp ion's board of directors. I bereby accept the	ose of changing its registered
agent I am familiar with, and accept the obligations	of, Section 607.0505, Flori	da Statutes.	and board of directions, increase, description	
SIGNATURE				
Signature typed or printed nation of regular idage of additional and the second second and the second secon		Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE D	DELETE	1.1 TITLE	ADDITIONS/OFFAIGLE TO OFFICE	Change Addition
NAME KING, HARRY		1.2 NAME		
STREET ADDRESS 1 AVENUE A		1.3 STREET ADDRESS		
CITY-ST-ZIP FT. PIERCE FL. 34950		1.4 CITY-ST-ZIP		
TITLE	☐ DELETE	2 1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADORESS		23 STREET ADDRESS		
CITY-ST-ZIP				
TITLE		2 4 City-St-ZIP		
NAME	DELETE	2 4 City-ST-ZIP 3 1 TIPLE		☐ Change ☐ Addition
INCLUSE.	DELETE	4		☐ Change ☐ Addition
STREET ADDRESS	DITETE	31 TIFLE		☐ Change ☐ Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	☐ DELETE	31 TITLE 32 NAME 33 STREET ADDRESS 34. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		☐ Change ☐ Addition
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14. Thereby 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 13 if changed, or on an alterhandly with an address.

SIGNATURE:

Harry King

HARRY KING

2/5/98 (54)466.0808