2004 FOR PROFIT CORPORATION

Feb 12, 2004 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P99000072422** 02-12-2004 90008 030 ***150.00 KING CAPITAL MANAGEMENT, INC. Mailing Address Principal Place of Business 4863 SW BERMUDA WAY 520 SW CAMDEN AVE 44010720 STUART, FL 34994 PALM CITY, FL 34990 No Chg-P CR2E034 (10/03) 02032004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0942593 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KING, SCOTT C DO NOT WRITE 4863 SW BERMUDA WAY PALM CITY, FL 34990 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 \Box Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. **PVSD** TITLE KING, SCOTT C NAME STREET ADDRESS 4863 SW BERMUDA WAY PALM CITY, FL 34990 CITY-ST-ZIP KING, MICHELLE E NAME STREET ADDRESS 4863 SW BERMUDA WAY CITY-ST-ZIP PALM CITY, FL 34990 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

FILED