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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$48223

THREE KINGS ENTERPRISES, INC.

(9)

FILED Apr 30 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 9220 NW 13TH AVE 9220 NW 13TH AVE MIAMI FL 33169 MIAMI FL 33147-3371								
			Ì		3. Date Incorporated or Qualif 04/26/1991		ate of Last R 03/1996	leport
2. Frincipal	Place of Business	2a. Mailing Address		,===,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4. FEI Number 65-0259065		ļ -	oplied For of Applicable
Suite, Ap	t #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Z	\$8.75 Fee Re	
City & Sta	ate	City & State			Election Campaign Financia Trust Fund Contribution	ng 🖂	\$5.00 Added	
7ip 24	Country 25	Ζιρ 29	Count	У	8. This corporation has liability Florida Statutes	Sex LD	□ No	. 199.032,
	9, Name and Address of Cu	rrent Registered Agent			10. Name and Address of New	N Registered	Agent	
	NG, ROMAN		8	1 Name				
9220 NW 13TH AVE MIAMI FL 33168			8	2 Street Addi	ress (P.O. Box Number is Not Acce	aptable)		
			8	3				
			8	4 City	<u>, , , , , , , , , , , , , , , , , , , </u>		85 Zip	Code
	it to the provisions of Sections 607, ringistered agent, or both, in the S	6/6/ L607 (500 5) 1 601 /				FL		
agent I SIGNATURE	am familiar with, and accept the ol-	bligations of, Section 607.0505, Fig	orida Statuti	98.	red when reinslating) ADDITIONS/CHANGES TO 0	DATE		
12.	OF FIGURE	DELETE	1.1 THE		ADDITIONS/CHANGES TO C	JET ICENS AN	Change	Addition
MAME STREET ADDRESS			1.2 NAME	1				
CITY+ST-ZiP	MIAMI FL	T Driege	1.4 CITY				T 1 Obsesse	Addition
TIFLE	NPD KING, ROMAN JR.	☐ DELETE	2.1 7(1)				Change	Addition
NAME STREET ADDRESS	AAAA BAA AATU AME		2.2 NAM	ET ADDRESS			s - 1	
CHTY ST-7IP	MIAMI FL			-ST-ZIP				
MILE	DST	DELETE	31 TITLE				Change	Addition
NAME	KING, LORRAINE		3.2 NAMI	:				
STHELT ADDRESS			3 3 STRE	ET ADDRESS				
City-St-ZIP	MIAMI FL	T ou or	3.4. CITY				1 1 01	Additor
Ti):E		☐ DELETE	4.1 TITLE	1			LJ Change	Addition
NAME Executivamentes	.}		4. 2 NAM	· .				
STREET ADORES:	3		4.3 STRE	ET ADDRESS				
City-St-ZiP TitlE		DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAM					
STREET ADDRESS	s		53 STRE	ET ADDRESS				
CITY-ST-ZIF			5.4 CITY	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAM	:				
STREET ADDRESS	s		6.3 STRE	ET ADDRESS	•			
CITY-S1-Z-2			64 CITY	-ST-ZIP				

I do 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

0206651