PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90124 026 ***150.00

1. Corporation	MENT # V69789 KING SWEDEN INC.				
Principal Place	of Business	Mailing Address			
17777 OLD CUTLER ROAD MIAMI FL 33157		TAX DEPT 08X3 200 SOUTH 6TH STREET MINNEAPOLIS MN 55402		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				10/08/1992	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For	-
21		26	•	65-0409063 Not Applica	ble
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional	ı
22		27		Fee Required	
City.& State		City & State	للوطال معطور سناسهم والمستشورين بعضات	6: Election Campaign Financing 55:00 May Be	
23	····	28		Trust Fund Contribution Added to Fees	
Zip	Country	Žip _	Country	8. This corporation owes the current year Intangible	
24	25	29 3	0	Personal Property Tax. Yes No 10. Name and Address of New Registered Agent	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM			o Hams		
1200 S PINE ISLAND ROAD			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324			83		\dashv
			65		
			84 City	FL 85 Zip Code	
office or re agent. I as	agistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agen	of Florida. Such change was autions of, Section 607.0505, Florid and title if applicable. (NOTE: R	egistered Agent signature rec		
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Add	JIUOII
NAME	CLAYTON, PAUL		1.2 NAME		Ì
STREET ADDRESS	17777 OLD CUTLER RD.		1.3 STREET ADDRESS	,	
CITY-ST-ZIP	MIAMI FL	O priess	1.4 CITY-ST-ZIP	☐ Change ☐ Ado	dition
ΠΠLE	D	☐ DELETE	2.1 TITLE		Jidon
NAME	HEGGIE, COLIN		2.2 NAME		1
STREET ADDRESS	17777 OLD CUTLER RD	•	2.3 STREET ADDRESS	1	}
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP 3.1 TITLE	CEO Change X Ado	dition
TITLE	V DAVID	CM DETELL		-DENNIS MALAMATINAS	
NAME	FITZJOHN, DAVID		3.2 NAME 3.3 STREET ADDRESS	17777 OLD CUTLER ROAD	l
STREET ADDRESS	17777 OLD CUTLER RD. Miami fl		3.4. CITY-ST-ZIP	MIAMI, FL 33157	- 1
CITY-ST-ZIP	VPSD	Ø DELET€	4.1 TITLE	C Change [X] Add	dition
ļ	GIRESI, MARK A		4, 2 NAME	JOHN B. MCGRATH, CHAIRMAN	
NAME STREET ADDRESS	17777 OLD CUTLER RD.		4.3 STREET ADDRESS	63 WALNUT CT ST. MARY'S GATE	
}	MIAMI FL 33157		4.4 CITY-ST-ZIP	KENSINGTON, LONDON ENGLAND W8 5UB	1
CITY-ST-ZIP	AS	☐ DELETE	5.1 TITLE	Change Add	dition
NAME	POPPELE, DONALD R		5.2 NAME		ľ
STREET ADDRESS	200 SOUTH SIXTH STREET		5.3 STREET ADORESS		
CITY-ST-ZIP	MINNEAPOLIS MN		5.4 CITY+ST-ZIP		
TITLE	THE OTHER PERSONS	☐ DETEÎE	6.1 TITLE	☐ Change ☐ Add	dition
NAME		_/	6.2 NAME		1

14. I hereby certify that the information supplied with his filing does not gualify 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 receiper 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

6.3 STREET ADDRESS

XSIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

REQUIREDUNALD PUPPELE

4-12-99

612-330-4020

Daytime Phone #