

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 20 AM 8:30

DOCUMENT # V71346

(3)

1. Corporation Name

KNIGHTSBRIDGE HOLDINGS CORPORATION

Principal Place of Business

1800 SECOND STREET
SUITE 870
SARASOTA FL 34236

Mailing Address

1800 SECOND STREET
SUITE 870
SARASOTA FL 34236

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/14/1992

3a. Date of Last Report

03/02/1994

4. FEI Number

65-0360727

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

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9. Name and Address of Current Registered Agent

GORDON, SCOTT E.
1800 SECOND STREET
SUITE 870
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name

Gordon Scott E.

82 Street Address (P.O. Box Number is Not Acceptable)

1800 Second St, Ste

83

Suite 870

84 City

Sarasota

FL

85 Zip Code

34236

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and title if applicable)

NOTE: Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS

TITLE

D
NOONOO, CLIFFORD
4215 DE MAISONNEUVE W.
WESTMOUNT, CANADA

NAME

STREET ADDRESS

CITY ST ZIP

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

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SIGNATURE:

SIGNATURE AND TITLE ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CLIFFORD NOONOO

4-27-95 (813) 955-1212