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Mar 31, 1999 8:00 am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V71579

1. Corporation Name
KINGS ISLE RECREATION CORP.

Principal Place of Business
**700 N.W. 107 AVENUE
MIAMI FL 33172**

Mailing Address
**700 N.W. 107 AVENUE
MIAMI FL 33172**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/15/1992

4. FEI Number

65-0462725

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

**MCCAIN, DAVID B., ESQ.
700 N.W. 107 AVENUE
MIAMI FL 33172**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
**DC
MILLER, LEONARD
700 NW 107 AVENUE
MIAMI FL**

TITLE ☒ DELETE

NAME
**DV
BOLOTIN, IRVING
700 NW 107 AVENUE
MIAMI FL**

TITLE ☐ DELETE

NAME
**T
MALCOLM, WAYNEWRIGHT
700 NW 107 AVENUE
MIAMI FL 33172**

TITLE ☐ DELETE

NAME
**VD
PEKOR, ALLAN J.
700 NW 107 AVENUE
MIAMI FL**

TITLE ☐ DELETE

NAME
**AS
SIERRA, KATHLEEN E.
700 NW 107 AVE
MIAMI FL**

TITLE ☐ DELETE

NAME
**PD
MILLER, STUART A.
700 NW 107 AVE
MIAMI FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

22 NAME
**VS
McCain, David B.
700 NW 107 Ave.
Miami FL 33172**

2.3 STREET ADDRESS ☐ Change ☐ Addition

2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **DAVID B. MCCAIN**

DAVID B. MCCAIN
VICE PRESIDENT

1/21/99

Date

305 229-6400

Daytime Phone #

CR2E034 (11/98)