2007 FOR PROFIT CORPORATION

FILED ANNUAL REPORT. Apr 12, 2007 08:00 All Secretary of State DOCUMENT # P01000047264 1. Entity Name KANCOR CONSTUCTION, INC. Principal Place of Business Mailing Address 2316 N RIO GRANDE 6000 METRO WEST BLVD ORLANDO, FL 32804 **SUITE 105** ORLANDO, FL 32835 03132007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3718138 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KANTOR, ORI DO NOT WRITE 2316 N RIO GRANDE ORLANDO, FL 32804 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS TITLE NAME KANTOR, ORI 2316 N RIO GRANDE STREET ADDRESS U00000703491 CITY-ST-ZIP ORLANDO, FL 32804 04/20/07-80143-009 150.0b TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP

12. I hereby certify that the information supplied with this tiling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that put Strature 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 corporation or the receiver or trustee empowered to execute this corporation. Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all open like empowering.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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