

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000025286

Entity Name: K.O.E., INC.

FILED  
Feb 12, 2006  
Secretary of State

**Current Principal Place of Business:**

5170 US HWY #1  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

5170 US HWY #1  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 65-0399839

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FARRELLY, GREGORY G  
C/O CATALFOMO & FARRELLY  
506 LOUISA STREET  
KEY WEST, FL 33040 US

**Name and Address of New Registered Agent:**

FARRELLY, GREGORY G  
C/O CATALFOMO & FARRELLY  
506 LOUISA STREET  
KEY WEST, FL 33040 US

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.

SIGNATURE: GREGORY G. FARRELLY

02/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SOTIS, RICHARD  
Address: 147 KEY HAVEN RD.  
City-St-Zip: KEY WEST, FL 33040 MO

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SOTIS, RICHARD F  
Address: 147 KEY HAVEN ROAD  
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD F. SOTIS

P

02/12/2006

Electronic Signature of Signing Officer or Director

Date