


2005 **FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 04, 2005 8:00 am**  
**Secretary of State**

05-04-2005 90188 030 \*\*\*158.75

DOCUMENT # P98000035495

1. Entity Name  
KANGAROO CORPORATION



**DO NOT WRITE IN THIS SPACE**

**50048538**

2. Principal Place of Business <u>204-37<sup>th</sup> AVE. N. #100</u>		3. Mailing Address <u>204-37<sup>th</sup> AVE. N. #100</u>		4. FEI Number <u>NOT APPLICABLE</u>		Applied For <input checked="" type="checkbox"/> Not Applicable	
Suite, Apt. #, etc. <u>#100</u>		Suite, Apt. #, etc. <u>#100</u>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required			
City & State <u>ST. PETERSBURG, FL</u>		City & State <u>ST. PETERSBURG, FL</u>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required			
Zip <u>33704</u>	Country <u>USA</u>	Zip <u>33704</u>	Country <u>USA</u>				

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name THOMAS E. DEWAN

Street Address (P.O. Box Number is Not Acceptable)  
204-37<sup>th</sup> AVE. N.

#100

City ST. PETERSBURG FL Zip Code 33704

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 T. E. Dewan  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<p>January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State</p>	<p>9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees</p>
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>D ROBERT CASH 204-37<sup>th</sup> AVE. N. #100 ST. PETERSBURG, FL 33704</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: T. E. Dewan 4-28-05 ph: (727) 420-3222