

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 329200

Entity Name: KAYJO, INC.

FILED
Apr 25, 2009
Secretary of State

Current Principal Place of Business:

71 HARBOR DR.
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

C/O LANCASTER & CO
50 W MASHTA DR #6
KEY BISCAYNE, FL 33149

New Mailing Address:

C/O LANCASTER & REED, LLC
50 W MASHTA DR., SUITE 6
KEY BISCAYNE, FL 33149

FEI Number: 59-1219280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANCASTER, CPA. K
50 W MASHTA DRIVE
SUITE 6
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

REED, RICHARD A CPA
50 W MASHTA DRIVE
SUITE 6
KEY BISCAYNE, FL 33149 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: RICHARD REED

04/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RICE, MICHAEL C
Address: 325 REDWOOD LANE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VPD () Delete
Name: RYAN, ROBIN J
Address: 1444 GROVE STREET
City-St-Zip: EUSTIS, FL 32726

Title: SD () Delete
Name: TIWARI, LESLIE
Address: 1717 N. BAYSHORE DRIVE, APT. 2538
City-St-Zip: MIAMI, FL 33132

Title: TD () Delete
Name: RHEW, PRISCILLA J
Address: 2610 BIRD AVE.
City-St-Zip: COCUNUT GROVE, FL 33133

Title: D () Delete
Name: RHEW, EDWIN E
Address: 1115 BROOKVIEW DRIVE
City-St-Zip: BRENTWOOD, TN 37027

Title: D () Delete
Name: RHEW, RUSSELL
Address: 4024 NESTLEDOWN DR.
City-St-Zip: FRANKLIN, TN 37064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL RICE

PD

04/25/2009

Electronic Signature of Signing Officer or Director

Date