

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2005 8:00 am
Secretary of State

05-19-2005 90044 034 ***150.00

DOCUMENT # 579491 1. Entity Name KENKAT INVESTMENTS, INC.			
Principal Place of Business 140 S BEACH STREET STE 102 DAYTONA BEACH, FL 32114		Mailing Address 140 S BEACH STREET STE 102 DAYTONA BEACH, FL 32114	
2. Principal Place of Business 555 W GRANADA BLVD STE D-11 ORMOND BEACH, FL 32174		3. Mailing Address 555 W GRANADA BLVD STE D-11 ORMOND BEACH, FL 32174	
Suite, Apt. #, etc. STE D-11		Suite, Apt. #, etc. STE D-11	
City & State ORMOND BEACH, FL		City & State ORMOND BEACH, FL	
Zip 32174		Zip 32174	
Country		Country	
6. Name and Address of Current Registered Agent NICHOLS, KENNETH E. 140 S BEACH STREET STE 102 DAYTONA BEACH, FL 32114		7. Name and Address of New Registered Agent Name NICHOLS, KENNETH E. Street Address (P.O. Box Number is Not Acceptable) 555 W GRANADA BLVD. STE D-11 City ORMOND BEACH FL Zip Code 32174	
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 <u><i>Kenneth E. Nichols</i></u> DATE <u>5-17-05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NICHOLS, KENNETH E 140 S BEACH STREET STE 102 DAYTONA BEACH, FL 32114 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NICHOLS, KENNETH E. 555 W GRANADA BLVD, STE D-11 ORMOND BEACH, FL 32174 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 Block 11 if changed, or on an attachment with an address with all other like empowered.			
SIGNATURE: <u><i>Kenneth E. Nichols</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>5-17-05</u> 386-615-3353 <small>Daytime Phone #</small>	