

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 585886

Entity Name: KENLIN, INC.

FILED
Feb 06, 2004
Secretary of State

Current Principal Place of Business:

1821 N.W. 18TH AVE. BLDG.41
APT. 102 CB 136
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

1821 N.W. 18TH AVE. BLDG.41
APT. 102 CB 136
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 59-1853911

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAINE, KEN
8812 LOCHMOOR ROAD
TAMPA, FL 33635 US

Name and Address of New Registered Agent:

CAINE, KEN
1821 N.W. 18TH AVE.
SUITE 102
DELRAY BEACH, FL 33445 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: KEN CAINE

02/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GOLDBERG, IRVING,
Address: 1821 NW 18TH AVE. BLDG 41, APT 102, CB 136
City-St-Zip: DELRAY BEACH, FL 33445

Title: TDD () Delete
Name: GOLDBERG, ESTELLE,
Address: 1821 NW 18TH AVE., BLDG. 41, APT 102 CB136
City-St-Zip: DELRAY BEACH, FL 33445

Title: S () Delete
Name: CAINE, KEN
Address: 8812 LOCHMOOR RD
City-St-Zip: TAMPA, FL

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KEN CAINE

VP

02/06/2004

Electronic Signature of Signing Officer or Director

Date