

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000932

FILED
Jan 13, 2004
Secretary of State

Entity Name: KIN PROPERTIES INC.

Current Principal Place of Business:

185 NW SPANISH RIVER BLVD
SUITE 100
BOCA RATON, FL 334314230

New Principal Place of Business:

Current Mailing Address:

185 NW SPANISH RIVER BLVD
SUITE 100
BOCA RATON, FL 334314230

New Mailing Address:

FEI Number: 13-2875908 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
103 N. MERIDIAN STREET
TALLAHASSEE, FL 323010000 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: SANDELMAN, JEFFREY
Address: 3905 SOUTH OCEAN BLVD.
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: VVT () Delete
Name: SANDELMAN, SUSAN
Address: 17915 LAKE ESTATES DRIVE
City-St-Zip: BOCA RATON, FL 33496

Title: SD () Delete
Name: SCHREIER, ALISON
Address: 4 MOHICAN TRAIL
City-St-Zip: SCARSDALE, NY 10583

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: SCHREIER, ALISON
Address: 400 S OCEAN BLVD #28
City-St-Zip: BOCA RATON, FL 33432

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: JEFFREY SANDELMAN

PRES

01/13/2004

Electronic Signature of Signing Officer or Director

_____ Date