

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000932

Entity Name: KIN PROPERTIES INC.

FILED  
Jan 06, 2005  
Secretary of State

## 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: 400 S OCEAN BLVD #28  
City-St-Zip: BOCA RATON, FL 33432

## 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: JEFFREY SANDELMAN

PRES

01/06/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date