

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 23, 2008 8:00 am**  
**Secretary of State**

04-11-2008 90048 012 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                              |                                                                                                                               |                                                                                                                                                                                                                                         |                                                                                                        |                                                                   |
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| <b>DOCUMENT # F02000005180</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                              |                                                                                                                               |                                                                                                                                                                                                                                         |                                                                                                        |                                                                   |
| <b>1. Entity Name</b><br>KAIROS COMMUNITY, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                              |                                                                                                                               |                                                                                                                                                                                                                                         |                                                                                                        |                                                                   |
| <b>Principal Place of Business</b><br>JOSE MARVOL 1734<br>BUENOS AIRES, ARGENTINA. 1602                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                              |                                                                                                                               | <b>Mailing Address</b><br>5465 NW 36 STREET<br>MIAMI, FL 33166                                                                                                                                                                          |                                                                                                        |                                                                   |
| <b>2. Principal Place of Business - No P.O. Box #</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                              | <b>3. Mailing Address</b>                                                                                                     |                                                                                                                                                                                                                                         |                                                                                                        |                                                                   |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                              | Suite, Apt. #, etc.                                                                                                           |                                                                                                                                                                                                                                         |                                                                                                        |                                                                   |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                              | City & State                                                                                                                  |                                                                                                                                                                                                                                         | <b>4. FEI Number</b><br>98-0383057                                                                     |                                                                   |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                              | Country                                                                                                                       |                                                                                                                                                                                                                                         | Zip                                                                                                    |                                                                   |
| Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                              | Country                                                                                                                       |                                                                                                                                                                                                                                         | <b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |                                                                   |
| <b>6. Name and Address of Current Registered Agent</b><br><br>ZIRENA, JOSE C<br>5465 NW 36 STREET<br>MIAMI, FL 33166                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                              |                                                                                                                               | <b>7. Name and Address of New Registered Agent</b><br>Name <u>JARAMILLO LUCIANO</u><br>Street Address (P.O. Box Number is Not Acceptable)<br><u>10422 NW 31 STREET</u><br>City <u>TERACE MIAMI</u> <u>FL</u> Zip Code <u>33147-1161</u> |                                                                                                        |                                                                   |
| <b>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</b>                                                                                                                                                                                                                                                                                                                                                                           |                                                                                              |                                                                                                                               |                                                                                                                                                                                                                                         |                                                                                                        |                                                                   |
| SIGNATURE<br><small>Signature is typed or printed name of registered agent and the # applicable</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                              |                                                                                                                               | DATE <u>July 21, 2008</u><br><small>(NOTE: Registered Agent signature required when renouncing)</small>                                                                                                                                 |                                                                                                        |                                                                   |
| <b>Filing Fee is \$61.25</b><br><b>Due by September 12, 2008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                              | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |                                                                                                                                                                                                                                         | Make check payable to<br><b>Florida Department of State</b>                                            |                                                                   |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                              |                                                                                                                               | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                                                                                                                                                                            |                                                                                                        |                                                                   |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>P</b><br>DE CELIS, GRACIELA B<br>A. SOBRAL 789, VILLA MARIA<br>ARGENTINA, cordoba         | <input type="checkbox"/> Delete                                                                                               | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                              | <b>P</b><br>DE CELIS GRACIELA B<br>A. SOBRAL 789 VILLA MARIA<br>ARGENTINA - CORDOBA.                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>V</b><br>RUELLA, OSCAR L<br>RIO CEBALLOS (5111)<br>CORDOBA, ARGENTINA, rioceball          | <input type="checkbox"/> Delete                                                                                               | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                              | <b>V</b><br>RUELLA OSCAR L.<br>RICARDO BARLESINA S.N 5111<br>ARGENTINA - CORDOBA                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>S</b><br>PADILLA, ELISA<br>ABERTI 1145, GENERAL PACHECO<br>ARGENTINA, b. aires            | <input type="checkbox"/> Delete                                                                                               | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                              | <b>D</b><br>PADILLA, ELISA<br>ALBERTI 1145, GENERAL PACHECO<br>ARGENTINA - BUENOS AIRES                | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>T</b><br>DE ECHENAGUCIA, HORACIO<br>WINEBERG 4020 LA LUCILA<br>ARGENTINA, b. aires        | <input type="checkbox"/> Delete                                                                                               | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                              |                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>V</b><br>VOTH, ESTEBAN M<br>LA PAMPA 1602 18B (1428)<br>BUENOS AIRES, ARGENTINA, cap. fed | <input type="checkbox"/> Delete                                                                                               | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                              |                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>V</b><br>PADILLA, CATALINA<br>O'HIGGINS 281, GENERAL PACHECO<br>ARGENTINA, b. aires       | <input type="checkbox"/> Delete                                                                                               | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                              |                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, and that my name is not listed in Block 10 or Block 11 as changed, or on an attachment with an address, with all other like employment.</b> |                                                                                              |                                                                                                                               |                                                                                                                                                                                                                                         |                                                                                                        |                                                                   |
| <b>SIGNATURE:</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                              |                                                                                                                               | Date <u>May 31<sup>st</sup> 2008</u> 54-011-4796-3306<br><small>Director's Phone #</small>                                                                                                                                              |                                                                                                        |                                                                   |