

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # F44984

1. Entity Name
KAY-BRO, INC.



Principal Place of Business

14950 SW 179TH ST
MIAMI, FL 33187

Mailing Address

14950 SW 179TH ST
MIAMI, FL 33187

FILED
Feb 12, 2007 08:00 A
Secretary of State



02222005 No Chg-P CR2E034 (10/03)

4. FEI Number

59-2388059

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CARLSON, DAVID LEE
145 CURTISS PKY.
MIAMI SPRINGS, FL 33166

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
KAY, SHERRY J.
14950 SW 179TH STREET
MIAMI, FL 33187

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
KAY, CALVIN C
14950 S.W. 179TH ST.
MIAMI, FL 33187

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000631092
02/20/07-80033-015 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Calvin C. Kay CALVIN C. KAY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 9, 2007 233-1031

Date

Daytime Phone #