


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 05, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F98000001794</b> 1. Entity Name KARINOA ENTERPRISES, INC.	
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Principal Place of Business 2533 N. CARSON ST., SUITE 3235 CARSON CITY, NV 89796 US	Mailing Address 2533 N. CARSON ST., SUITE 3235 CARSON CITY, NV 89796 US
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**DO NOT WRITE IN THIS SPACE**



07122005 No Chg-P CR2E034 (10/03)

4. FEI Number 86-0883343	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
HERRERA, ANABEL  
9485 SUNSET DRIVE  
A-115  
MIAMI, FL 33173

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CST COLLAZO, CARLOS M 1670 S. AMPHLETT BLVD., #300 SAN MATEO, CA 94402
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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08/05/05-80007-018 150.00

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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)(f), 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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR