2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # G47556

1. Entity Name
KESS INDUSTRIAL PRODUCTS, INC.

Principal Place of Business	Mailing Address
8617 N.W. 66 STREET MIAMI, FL 33166	8617 N.W. 66 STREET MIAMI, FL 33166

DO NOT WRITE IN THIS SPACE

03292005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-2325844	Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ, JUAN B
5520 SW 70 PLACE
MIAMI, FL 33155

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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	P
NAME	FERNANDEZ, JAUN B
STREET ADDRESS	5520 SW 70TH PLACE
CITY-ST-ZIP	MIAMI, FL 33155
TITLE	VP
NAME	FERNANDEZ, JUAN M
STREET ADDRESS	8005 SW 134 CT
CITY-ST-ZIP	MIAMI, FL
TITLE	S
NAME	FERNANDEZ, BERNICE
STREET ADDRESS	8290 NW 166 TERR
CITY-ST-ZIP	MIAMI, FL 33016
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000281595
03/31/05-80009-018 150.00

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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: _Bernice Fernandez_ (Bernice Fernandez)   3/29/05   (305)591-1850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #