2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G80661

Entity Name: KABA BENZING AMERICA INC.

FILED Jun 16, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	TH COMMERCE F TH COMMERCE F		US	
Current Mailing Address:			New Mailing Address:	
	RTH COMMERCE F S, FL 33025 US	PARKWAY		
FEI Number	: 59-2355219 FE	El Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Curre	ent Registered Agent:	Name and Address of	of New Registered Agent:
3015 NOR	, M. MICHAEL TH COMMERCE F ;, FL 33025 US	PARKWAY		
	e named entity subn e of Florida.	nits this statement for the	purpose of changing its registere	d office or registered agent, or both,
SIGNATUI				
	Electronic S	ignature of Registered Ag	ent	Date
Election Car	mpaign Financing Tru	st Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	VD () Dele SLOVIN, STEPHAN A 1325 NW 127 AVE CORAL SPRINGS, F	1. ,	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Dele STADELMANN, WEF 3015 NORTH COMM MIRAMAR, FL 3302	RNER IERCE PARKWAY	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	P (X) Dele EDWARDS, JOHN J 792 REGAL COVE R WESTON, FL 33327	R OAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	CFO () Dele HUSSAIN, MICHAEL 8950 NW 189TH TEI HIALEAH, FL 33018	RRACE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	S ()Dele	te	Title: Name:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Address:

City-St-Zip:

SIGNATURE: MICHAEL HUSSAIN CFO 06/16/2008

3015 NORTH COMMERCE PARKWAY

Address:

City-St-Zip: MIRAMAR, FL 33125