2005 FOR PROFIT CORPORATION ANNUAL REPORT						FILED Apr 25, 2005 8:00 am Secretary of State				
DOCUMENT # K01692 1. Entity Name K & S CATTLE COMPANY, INC.					Secretary of State 04-25-2005 90293 013 ***150.00					
Principal Place of Business 9625 WES KEARNEY WAY RIVERVIEW, FL 33569 US		Mailing Address 9625 WES KEARNEY WAY RIVERVIEW, FL 33569 US								
2. Principal P	lace of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04192005	Chg-P	CR2E0	34 (10/03)		
City & State		City & State			4. FEI Numb 65-001				plied For	
Zip 	Country	Zip	Country		1	of Status Desired		\$8.75 Add Fee Required	litional	
6. Name and Address of Current Registered Agent REED, JAMES M 9625 WES KEARNEY WAY RIVERVIEW, FL 33569			Name			er is Not Acceptat		Agent	. <u> </u>	
	named entity submits this statement f	at the purpose of chapping its	City			the in the State of I	FL	Zip Code		
	ions of registered agent.		-					anniar wiar,		
	Signature, typed or printed name of registered agen E NOWIII FEE IS \$150.00 By 1, 2005 Fee will be \$550.	9. Election Campa		\$5	.00 May Be led to Fees		DATE			
10.	OFFICERS AND	DIRECTORS	11.	. <u> </u>	ADDITIÓNS	L /CHANGES TÖ OI	FICERS AND	DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KEARNEY, C.W., SR. 9625 WES KEARNEY WAY RIVERVIEW, FL	Delete	TITLE NAME STREET ADDRES CITY - ST - ZIP	s				Change	Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KEARNEY, C.W., JR. 9625 WES KERANEY WAY RIVERVIEW, FL	Delete	TITLE NAME STREET ADDRES CITY - ST - ZIP	s 962	5 WES K	SING C.W. EARNEY W FL 3356	AY	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KEARNEY, JOANNE 9625 WES KEARNEY WAY RIVERVIEW, FL	XI Detete	TITLE NAME STREET ADDRES CITY - ST - ZIP				<u> </u>	Change	Addition	
TITLE NAME Street adoress City-St-Zip	D KEARNEY, BRYAN 9625 WES KEARNEY WAY RIVERVIEW, FL	Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s				Change	Addition	
TITLE NAME STREET ADDRESS CITY+ST-ZIP		Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	is				Change	Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s				Change	Addition	
indicated of the cor	certify that the information supplied wi on this report or supplemental report poration or the receiver or trustee em or on an attachment with an address URE:	is true and accurate and that powered to execute this report	rny signature sha t as repolited by C	II have the Chapter 60	same legal effe 7, Florida Statut	ct as if made under es; and that my na	er oath; that I a me appears in 005	am an officer n Block 10 o	nformation or director r Block 11 if 521–085	