2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K20946

Name:

Address:

City-St-Zip:

MIELKE, DENISE

DELRAY BEACH, FL 33444

656 IBIS DRIVE

Entity Name: K.A.M. SPECIALTIES, INC

FILED Apr 02, 2009 Secretary of State

Littly Nan	IIE. R.A.W. SF	COALTI	LO, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
1440 SW 2 POMPANC	8 AVE) BEACH, FL 3	33069	US		730 S. POWERLINE ROA UNIT H DEERFIELD BEACH, FL		
Current Mailing Address:				New Mailing Address:			
1440 SW 2 POMPANC	8 AVE) BEACH, FL 3	33069	US		730 S. POWERLINE ROA UNIT H DEERFIELD BEACH, FL		
FEI Number:	65-0044264	FEI Num	nber Applied For()	FEI Nun	nber Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name					Name and Address of New Registered Agent:		
HANLEY, NEIL 1440 SW 28 AVE POMPANO BCH, FL 33069 US				HANLEY, NEIL 730 S. POWERLINE ROAD UNIT H DEERFIELD BEACH, FL 33442 US			
The above in the State		submits th	nis statement for the pu	urpose o	f changing its registered of	ffice or registered agent, or both,	
SIGNATURE:				04/02/2009			
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PSD () BEARDEN-HANI 2500 NE 47 ST LIGHTHOUSE P				Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	TD () HANLEY, NEIL 2500 NE 47 ST LIGHTHOUSE P	Delete	33064		Title: () Name: Address: City-St-Zip:	Change () Addition	
Title:	D ()	Delete			Title: ()	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.

Name:

Address:

City-St-Zip:

SIGNATURE: DEBORAH BEARDEN-HANLEY P 04/02/2009