2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K56860

1. Entity Name

K'S FAMILY PIZZERIA AND RESTAURANT, INC.



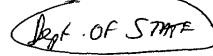
Principal Place of Business

% ARCHAGELOS KOURPOUANIDIS 2000 RIO DE IANIERO BLVD., UNIT 7 PORT CHARLOTTE, FL 33983

Mailing Address

% ARCHAGELOS KOURPOUANIDIS 2000 RIO DE JANIERO BLVD., UNIT 7 PORT CHARLOTTE, FL 33983

FILED Jan 26, 2005 08:00 AM **Secretary of State**





DO NOT WRITE IN THIS SPACE

01132005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0092173 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

KOURPOUANIDIS, ARCHAGELOS 2000 RIO DE JANIERO BLVD. UNIT 7, DEEP CREEK PLAZA PORT CHARLOTTE, FL 33983

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	d office or registered agent, or b	oth, in the State of Florida. I am familiar wit	h, and accept
SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NOTE Registered agent and title it applicable.			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 \$5.00 May Be Trust Fund Contribution.			
10.	OFFICERS AND DIREC	TORS			38 F F 7 7 1 8 8 1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOURPOUANIDIS, ARCHAGELO 2000 RIO DE JANIERO BLVD PORT CHARLOTTE, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOURPOUANIDIS, DESPINA 2000 RIO DE JANIERO BLVD PORT CHARLOTTE, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

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: