2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M36477

Entity Name: KENJA VENTURE, INC

FILED Mar 12, 2008 Secretary of State

,	ic. ILLINO/ V	LINTORE, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
7565 W. 20TH AVE. HIALEAH, FL 33014				7565 WEST 20TH AVENUE HIALEAH, FL 33014			
Current Mailing Address:				New Mailing Address:			
390 UNION BLVD SUITE 540 LAKEWOOD, CO 80228				390 UNION BLVD. SUITE 540 LAKEWOOD, CO 80228			
FEI Number:	59-2838398	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:		Name and	Address of	New Registered Agent:	
1200 SOUT	DRATION SYS TH PINE ISLA DN, FL 33324	ND ROAD					
The above in the State		submits this statement for the	purpose o	f changing it	s registered	office or registered agent, or both,	
SIGNATUR	E:						
	Electror	nic Signature of Registered Ag	jent			Date	
Election Cam	paign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	P () LOWRIE, TRO 390 UNION BLY LAKEWOOD, C	/D., SUITE 540		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CFO () LEWIS, BRENT 390 UNION BLY LAKEWOOD, C	/D., SUITE 540		Title: Name: Address: City-St-Zip:	LOWRIE, TRO	LVD., SUITE 540	
Title: Name: Address: City-St-Zip:	OCELLO, MICH	PPI AVE., BAY 10		Title: Name: Address: City-St-Zip:	OCELLO, MIC	SIPPI AVENUE, BAY 10	
Title: Name: Address: City-St-Zip:	()) Delete		Title: Name: Address: City-St-Zip:	OCELLO, MIC	SIPPI AVENUE, BAY 10	
Title: Name: Address: City-St-Zip:	()) Delete		Title: Name: Address: City-St-Zip:	OCELLO, MIC	SIPPI AVENUE, BAY 10	

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.

SIGNATURE: TROY LOWRIE PRES 03/12/2008