2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M49618

Address:

City-St-Zip:

8744 LOST COVE DR

ORLANDO, FL 32819

Entity Name: KANON SERVICE CORPORATION

FILED Jan 06, 2004 Secretary of State

Littly Nai	ille. KANON	SERVICE CORFORATION			
Current Principal Place of Business:			New Principal Place of	of Business:	
7130 S ORANGE BLOSSOM TRAIL		SOM TRAIL			
STE 200 ORLANDO	D, FL 32809	US			
Current Mailing Address:			New Mailing Address:		
C/O PETE P O BOX 6 ORLANDO					
FEI Number:	: 59-3036557	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
#200 ORLANDO	RANGE BLOS D, FL 32809	us	nurnose of changing its registered	d office or registered agent, or both.	
	e of Florida.	submits this statement for the	purpose or changing its registered	Tollice of Teglstered agent, of both,	
SIGNATU	RE:				
	Electro	onic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD (LEE, PETER, 8744 LOST CO ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VSD (LEE, HAESUN) Delete	Title: Name:	() Change () Addition	

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PETER LEE PRE 01/06/2004