2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 14, 2004 08:00 AM Secretary of State **DOCUMENT # M74475** KITCHENIQUE, INC. Mailing Address Principal Place of Business 9375 HWY. 98 W., #7 9375 HWY. 98 W., #7 DESTIN, FL 32550 DESTIN, FL 32550 01152004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2936673 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MCCAIN, VICKI 925 S. HWY. 393 SANTA ROSA BEACH, FL 32459 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 U00000111910 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE MCCAIN, VICKI NAME STREET ADDRESS 925 S. HWY. 393 CiTY-ST-ZIP SANTA ROSA BEACH, FL 32459 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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.

FILED