2007 FOR PROFIT CORPORATION . ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

Jan 19, 2007 08:00 AM DOCUMENT # P00000008472 **Secretary of State** 1. Entity Name K & K COMMERCIAL PROPERTIES, INC. Principal Place of Business Mailing Address 5004-5016 US 19 814 CHRISTINA CIRCLE NEW PORT RICHEY, FL 34652 OLDSMAR, FL 34677 01152007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3625119 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GIANG, KATHY W DO NOT WRITE 814 CHRISTINA CIRCLE OLDSMAR, FL 34677 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. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution, Added to Fees 10. OFFICERS AND DIRECTORS TITLE GIANG, KATHY NAME STREET ADDRESS 814 CHRISTINA CIRCLE CITY-ST-ZIP OLDSMAR, FL 34677 VP TITLE HO, TERRY NAME STREET ADDRESS 11617 BUR MAC RD CITY-ST-ZIP DADE CITY, FL 33525 TITLE NAME STREET ADDRESS DO NOT WRI CITY-ST-ZIP TITLE ** IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 is changed, or on an attachment with an address, with all other like empowered.

KA1 My GiAng 01/15/07

FILED