2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000081759

Address:

City-St-Zip:

440 OAKHURST ST.

ALTAMONTE SPRINGS, FL 32701

Entity Name: BIG KAHUNA ENTERPRISES, INC.

FILED Jan 04, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: P O BOX 151326 ALTAMONTE SPRINGS, FL 32715 **Current Mailing Address: New Mailing Address:** P O BOX 151326 ALTAMONTE SPRINGS, FL 32715 FEI Number: 59-3676437 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COOK, KELLY L 440 OÁKHURST ST. ALTAMONTE SPRINGS, FL 32701 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition COOK, ROBERT L COOK, ROBERT L Name: Name: 113 SMITH AVE 510 CRANES WAY #302 Address: Address: City-St-Zip: NEW ELLENTON, SC 29809 City-St-Zip: ALTAMONTE SPRINGS, FL 32701 Title: Title: TD () Delete () Change () Addition Name: COOK, KENDALL Name: 1045 OLD MILL TRACE Address: Address: MONROE, GA 30656 City-St-Zip: City-St-Zip: Title: Title: SD () Delete SD (X) Change () Addition COOK, KAREN COOK, KAREN Name: Name: 113 SMITH AVE 510 CRANES WAY #302 Address: Address: City-St-Zip: NEW ELLENTON, SC 29809 City-St-Zip: ALTAMONTE SPRINGS, FL 32701 Title: DVP () Delete Title: () Change () Addition COOK, KELLY L Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: KELLY L. COOK DVP 01/04/2006