2004 FOR PROFIT CORPORATION

Aug 23, 2004 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # P01000019386 08-23-2004 90017 047 ***150.00 K & B SOLAR SYSTEMS INC. Principal Place of Business Mailing Address 27013 SHANNAHAN RD. 54069504 27013 SHANNAHAN RD. RAMROD KEY, FL 33042 RAMROD KEY, FL 33042 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08052004 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For ~65-1079696~ - - Not Applicable Country Country Zio Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GEIDE, DAVID Street Address (P.O. Box Number is Not Acceptable) 27013 SHANNAHAN RD. RAMROD KEY, FL 33042 City Zip Code FL 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. Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Added to Fees Due by September 8, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. D TITLE ☐ Change Addition TITLE ☐ Delete GEIDE, DAVID NAME HAME 27013 SHANNAHAN RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP RAMROD KEY, FL 33042 CITY-ST-ZIP. TITLE Change ☐ Delete -- - Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CUY-SI-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filing 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.

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RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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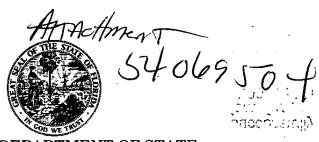
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 5, 2004

PATIENCE ACCOUNTING AND TAX SERVICE, INC. ATTN: MARILYN SOMMERHOFF, E.A. PO BOX 503 SUMMERLAND KEY, FL 33042

SUBJECT: K & B SOLAR SYSTEMS INC.

Ref. Number: P01000019386

We have received your document for K & B SOLAR SYSTEMS INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$150.00.

Although you attempted to file your annual report online, you did not successfully complete the process. Therefore, we are enclosing an annual report form for you to complete. Please return the completed form and your check \$150.00, which was not enclosed.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Eula Peterson Document Specialist

Letter Number: 104A00048645