

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000032277 1. Entity Name KEVINO'S, INC.			
Principal Place of Business 2401 EDGEWATER DR. ORLANDO, FL 32804		Mailing Address 2401 EDGEWATER DR. ORLANDO, FL 32804	
DO NOT WRITE IN THIS SPACE			
6. Name and Address of Current Registered Agent FONZO, KEVIN 2401 EDGEWATER DR ORLANDO, FL 32804		DO NOT WRITE 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: <u><i>Kevin Fonzo</i></u> DATE: <u>4-28-05</u> (Signature typed or printed name of registered agent and date it applies. (NOTE: Registered Agent signature required when replacing))			
FILE NOW!! FEE IS \$150.00 After May 1, 2005 Fee will be \$250.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May be Added to Fees	
10. OFFICERS AND DIRECTORS		400008352047 05/03/05-80011-019 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FONZO, KEVIN 2401 EDGEWATER DRIVE ORLANDO, FL 32804	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST FONZO, FRANK 380 TRIANA ST. SPRINGHILL, FL 34609		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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12. 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.			
SIGNATURE: <u><i>Kevin Fonzo</i></u>		4-28-05 409-872-2332	