


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 19, 2005 8:00 am**  
**Secretary of State**

07-19-2005 90038 048 \*\*\*150.00

<b>DOCUMENT # P01000048130</b> 1. Entity Name <b>KIMOZOBY INC.</b>	
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Principal Place of Business <b>3640 NW 113TH AVE CORAL SPRINGS, FL 33065</b>	Mailing Address <b>3640 NW 113TH AVE CORAL SPRINGS, FL 33065</b>
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**DO NOT WRITE IN THIS SPACE**

**50056053**

07142005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-1112465</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

~~LEIBOWITZ, JERRY D~~  
~~3181 WEST HALLANDALE BEACH BLVD.~~  
~~REMBROKE PARK, FL 33009~~  
**Andrew M. Zobl**  
**3640 NW 113TH AVE**  
**CORAL SPRINGS, FLORIDA 33076**

**CHANGE OF NAME & Address**

**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   **7/15/05**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

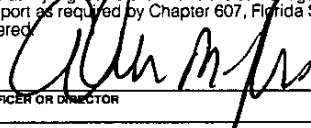
<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZOBIN, ANDREW M 9920 NORTH WST 57 MANOR CORAL SPRINGS, FL 33076
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**DO NOT WRITE IN THIS SPACE**

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: **Andrew M. Zobl**  **7/15/05** (955) 255-8980

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #