2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000120836

Entity Name: KASCO ENTERPRISES, INC.

FILED Oct 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3240 GULF COAST DR 13825 US HWY 19 N HERNANDO BCH, FL 34607

SUITE 302

HUDSON, FL 34667

Current Mailing Address: New Mailing Address:

3240 GULF COAST DR 13825 US HWY 19 N SUITE 302 HERNANDO BCH, FL 34607

HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 80-0030469 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:

CRADDOCK, SHARON CRADDOCK, SHARON 13825 US HWY 19 N 3240 GULF COAST DR

HERNANDO BCH, FL 34607 US SUITE 302 HUDSON, FL 34667 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: SHARON CRADDOCK 10/05/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

CRADDOCK, KEN CRADDOCK, KENNETH L Name: Name: 3240 GULF COAST DR 1400 CORYDON AV Address: Address: City-St-Zip: HERNANDO BCH, FL 34607 City-St-Zip: SPRING HILL, FL 34609

Title: () Delete Title: DP (X) Change () Addition

CRADDOCK, SHARON Name: Name: CRADDOCK, SHARON 3240 GULF COAST DR Address: 1400 CORYDON AV Address: HERNANDO BCH, FL 34607 SPRING HILL, FL 34609 City-St-Zip: City-St-Zip:

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

SIGNATURE: SHARON CRADDOCK DP 10/05/2005