


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 07, 2007 08:00 AM
Secretary of State

DOCUMENT #P02000029363 1. Entity Name KENNY - AUSTINS INC.	
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Principal Place of Business 4640PALLADIN ST #29 WEST PALM BEACH, FL 33417	Mailing Address 4640PALLADIN ST #29 WEST PALM BEACH, FL 33417
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06112007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 74-3039032	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BOUTILIER, KIM
4640 PALLADIN ST
#29
WEST PALM BEACH, FL 33417**

**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 _____ (NOTE: Registered Agent signature required when restate) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST- ZIP	S BOUTILIER, KIM M 4640 PALLADIN ST #29 WEST PALM BEACH, FL 33417
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D BOUTILIER, KENNETH J 4640 PALLADIN ST #29 WEST PALM BEACH, FL 33417
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IN THIS SPACE**

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08/07/07-00010-002 550.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **Kim Boutilier** **7/7/07** **951-2336**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #