2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 23, 2004 08:00 AM Secretary of State DOCUMENT # P02000047237 1. Entity Name KERYN CORPORATION Principal Place of Business Mailing Address 1561 PLANTATION OAKS LANE 1561 PLANTATION OAKS LANE FERNANDINA BEACH, FL 32034 FERNANDINA BEACH, FL 32034 04152004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0608770 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COBB, RICHARD G SR. DO NOT WRITE 1561 PLANTATION OAKS LN. FERNANDINA BEACH, FL 32034 IN THIS SPACE 8. The above named entity submits this statement for the ourpose 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 if applicable. (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000127233 \Box Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE COBB, RICHARD R SR. NAME STREET ADDRESS 1561 PLANTATION OAKS LN. CITY-ST-ZIP FERNANDINA BEACH, FL 32034 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

904.761.0824

Daytime Phone #