

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081628

Entity Name: KPAX, INC.

FILED  
Apr 14, 2008  
Secretary of State

## Current Principal Place of Business:

5037 NW 165 STREET  
MIAMI, FL 33014

## New Principal Place of Business:

4760 NW 165 STREET  
MIAMI GARDENS, FL 33014

## Current Mailing Address:

5037 NW 165 STREET  
MIAMI, FL 33014

## New Mailing Address:

4760 NW 165 STREET  
MIAMI GARDENS, FL 33014

FEI Number: 11-3644981

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARVALHO, CARLOS A  
5275 NW 163 STREET  
MIAMI, FL 33014 US

## Name and Address of New Registered Agent:

CARVALHO, CARLOS A  
4760 NW 165 STREET  
MIAMI GARDENS, FL 33014 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:

04/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CARVALHO, CARLOS A  
Address: 5275 NW 163 STREET  
City-St-Zip: MIAMI, FL 33014

Title: D ( ) Delete  
Name: CABUS, ALBEIRA  
Address: 5275 NW 163 ST  
City-St-Zip: MIAMI, FL 33014

Title: D ( ) Delete  
Name: CABUS, ADRIANA D  
Address: 5275 NW 163 ST  
City-St-Zip: MIAMI, FL 33014

Title: D ( ) Delete  
Name: CABUS, PAULA  
Address: 5275 NW 163 ST  
City-St-Zip: MIAMI, FL 33014

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CARVALHO, CARLOS A  
Address: 4760 NW 165 STREET  
City-St-Zip: MIAMI GARDENS, FL 33014

Title: D (X) Change ( ) Addition  
Name: CABUS, ALBEIRA  
Address: 4760 NW 165 ST  
City-St-Zip: MIAMI GARDENS, FL 33014

Title: D (X) Change ( ) Addition  
Name: CABUS, ADRIANA D  
Address: 4760 NW 165 ST  
City-St-Zip: MIAMI GARDENS, FL 33014

Title: D (X) Change ( ) Addition  
Name: CABUS, PAULA  
Address: 4760 NW 165 ST  
City-St-Zip: MIAMI GARDENS, FL 33014

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ALBEIRA CABUS

D

04/14/2008

Electronic Signature of Signing Officer or Director

Date