2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 15, 2006 08:00 AM Secretary of State

ANNOAL REPORT			1111 13, 2000 00.00 AN		
DOCUMENT # P0200008304 1. Entity Name KOSTO'S CORP.	12			Secreta	ry of State
6800 NW 84TH AVE	Mading Address 6800 NW 847H AVE MIAMI, FL 33166		S FORWARD ME ROUE	HTH AT THE COLUMN TO THE STATE OF	NA ANNUNUN SOSSA SOSSA SISTEMA SI SOSSA SA SOSSA
DO NOT WRITE IN THIS SPA		CE	}	lo Chg-P C	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
6. Name and Address of Current Reg KHAWAIN, YAMIL 6800 NW 84TH AVE MIAMI, FL 33166	istered Agent			OT WR IIS SPA	
The above named entity submits this statement for the purpose of changing its registered office or register the obligations of registered agent. SIGNATURE Signature types or printed name of registered agent and rite if applicable INOTE: Registered Agent signature require FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.				the State of Florida	i. I am familiar with, and accept
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ECTORS		DO N	U00000468 /24/06-800	
STREET ADDRESS		1			

12. I hereby certify that the information supplied with this filling 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 it made under path; 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 other like empowered.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/04 (305)418960,