## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P02000118838

1. Entity Name

KURT COMMUNICATIONS INC.



FILED Mar 29, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

6607 REEF CIRCLE TAMPA, FL 33625 6607 REEF CIRCLE TAMPA, FL 33625



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03252006 No Chg-P CR2

CR2E034 (11/05)

4. FEI Number 82-0570978 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

HAREBIN, KHURT 6607 REEF CIRCLE TAMPA, FL 33625

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

				27.4	
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					
Signature, typed or printed name of importered agent and trie if explicable. (INOTE: Ribgistered Agent signature required when reinstating) OATE					
FILE NOWIN FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		<ol> <li>Election Campaign Finance Trust Fund Contribution.</li> </ol>	oing 🖂	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			<del></del>
TITLE NAME STRICET ADDRESS CITY-ST-ZIP	PSTD HAREBIN, KHURT 6607 REEF CIRCLE TAMPA, FL 33625				U00000484207 04/12/06-80029-015 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
HITLE NAME STREET ADDRESS CITY-ST-ZP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CHY-ST-ZIP					
TITLE NAME STREET ACCIRESS CITY-ST-ZIP					
12. Thereby 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 suppliemental 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 champed, or on an attachment with an address, with all other like empowered.					

KHURT HAREBIN 3/25/06