2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 13, 2006 08:00 AM **Secretary of State** DOCUMENT # P02000134808 KENNETH HINE, INC. Principal Place of Business Mailing Address 9584 NW 24TH CT. 9584 NW 24TH CT. CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065 03052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 61-1433500 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HINE, KENNETH DO NOT WRITE 9584 NW 24TH CT. CORAL SPRINGS, FL 33065 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, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing ~ \$5.00 May Be FILE NOWIN FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE HINE, KENNETH NAME STREET ADDRESS 9584 NW 24TH COURT CITY-ST-ZIP CORAL SPRINGS, FL 33065 UHUUHU464 700 NAME #3/2**2/**06-80007-001 190.00 STREET ADDRESS CITY-ST-ZIP 7172 F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP DELF IN THIS SPACE NAME STREET ADDRESS CTTY-ST-ZIP THE STREET ADDRESS CITY-ST-ZIP

12. Thereby 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 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:

MARKE STREET ADDRESS

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED