2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

9/1/2006-90002-011-$150.00-$150.00

FILED
06 OCT 31 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT# P03000048015

1. Entity Name
THE HANDYMAN KYLE, INC.

Principal Place of Business	Mailing Address
HOME BOCA RATON FL 33428	22115 SW 58 AVE BOCA RATON FL 33428

2. Principal Place of Business	3. Mailing Address
2014 W McCartylane	2014 W McCartylane
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: San Marcos TX 78	City & State: San Marcos TX
Zip: 78666 Country	Zip: 78666 Country

2nd MOORE CR2E034 (4/06) 06

4. FEI Number 36-4546423 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
PECHULS, KYLE
22115 SW 58 AVE
BOCA RATON FL 33428

7. Name and Address of New Registered Agent
Name: CHARLES, PECHULS
Street Address (P.O. Box Number is Not Acceptable): 6102 NW 19 St
City: MARGATE FL Zip Code: 33063

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] DATE 10-05-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $550.00
DUE BY September 6, 2005
Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the $400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is $150.00. ☑

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PECHULS, KYLE 22115 SW 58 AVE BOCA RATON FL 33428 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby 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 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: Kyle A Pechuls — Aug 21-2006 — Home 512 667 6329
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Business 512 665 9825