

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000073530

FILED
Apr 29, 2004
Secretary of State

Entity Name: KELSTA, INC.

Current Principal Place of Business:

505 AVENUE A, NW
SUITE 102
WINTER HAVEN, FL 33881

New Principal Place of Business:

117 EAST LAKE AVENUE
AUBURNDALE, FL 33823

Current Mailing Address:

505 AVENUE A, NW
SUITE 102
WINTER HAVEN, FL 33881

New Mailing Address:

117 EAST LAKE AVENUE
AUBURNDALE, FL 33823

FEI Number: 86-1082218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOVONI, HARDING & ASSOCIATES, INC.
505 AVENUE A, NW
SUITE 102
WINTER HAVEN, FL 33881

Name and Address of New Registered Agent:

OWEN, BERYL MRS
117 EAST LAKE AVENUE
AUBURNDALE, FL 33823

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: BERYL OWEN

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: OWEN, PETER M
Address: 243 PURSLANE PASS
City-St-Zip: DAVENPORT, FL 33897

Title: VS () Delete
Name: OWEN, BERYL
Address: 243 PURSLANE PASS
City-St-Zip: DAVENPORT, FL 33897

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: OWEN, PETER M
Address: 117 EAST LAKE AVENUE
City-St-Zip: AUBURNDALE, FL 33823

Title: VS (X) Change () Addition
Name: OWEN, BERYL
Address: 117 EAST LAKE AVENUE
City-St-Zip: AUBURNDALE, FL 33823

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BERYL OWEN

VS

04/29/2004

Electronic Signature of Signing Officer or Director

Date