

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000090615

Entity Name: KSB ASSOCIATES, INC.

FILED
Jan 10, 2005
Secretary of State

Current Principal Place of Business:

214 E BEARSS AVE
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

214 E BEARSS AVE
TAMPA, FL 33613

New Mailing Address:

FEI Number: 54-2121988

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BITAH, SAID VICE-PR
301 REGAL PARK DR
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BITAH, SAID
Address: 301 REGAL PARK DR
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: BOUABID, ABDELKRIM
Address: 1713 POWDER RIDGE DR
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BITAH, SAID VICE PR
Address: 301 REGAL PARK DR
City-St-Zip: VALRICO, FL 33594

Title: D (X) Change () Addition
Name: BOUABID, ABDELKRIM PR
Address: 1713 POWDER RIDGE DR
City-St-Zip: VALRICO, FL 33594

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: SAID BITAH

V-PR

01/10/2005

Electronic Signature of Signing Officer or Director

Date