2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 17, 2005 08:00 AM Secretary of State

	MINIOHE	REPORT		حخمصت إيا	Caa	4 of C4-4-		
DOCUMENT # P03000124089 1. Entity Name K. WEED CONSULTANTS INC.		.089			Secretary of State			
Principal Plac	ce of Business	Mailing Address						
48 WESTFIE	LD LANE	48 WESTFIELD LANE						
PALM COAST	T, FL 32164	PALM COAST, FL 32164						
				L the acceptant for annual men	CHIL GETH METH GMIEL HWI	COL (1 (86) 818) 1811 8118 (818)		
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DO NOT WHITE IN THIS OF A			-	4. FE! Number 30-0222776	R	Applied For Not Applicable		
			ĺ			99 75 Additional		
				5. Certificate of Sta	tus Desired [Fee Required		
	6. Name and Address of Current F	Registered Agent						
WEED, GLENN 48 WESTFIELD LANE				DO NO	OT WR	TE		
PALM COAST, FL 32164				IN THIS SPACE				
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9 The above	named entity submits this statement for	the purpose of changing its registered	office or registers		he State of Florida	Lam familias with and appare		
the obligat	tions of eastered agenty	the borbose of clistrightly its registered	orace or registere	ad agant, or bour, are	ne state of Florida.	raminamai wiiri, ariu accepi		
	(Men Wille				. 9	lielar		
SIGNATURE.	Signature, typed or printed name of registered agent as	nd title if applicable. (NOTE, Registered A	gent signature required	when reinstating)		DATE		
								
FIL	E NOW!!! FEE IS \$150.00	9. Election Campaign Financia		00 May Be				
	ay 1, 2005 Fee will be \$550.0	O Trust Fund Contribution.	Ll Adde	ed to Fees				
10.	OFFICERS AND C	DIRECTORS						
TITLE	Р							
NAME	WEED, GLENN]-						
STREET ADDRESS	48 WESTFIELD LANE					7.4F4		
CITY-ST-ZIP	PALM COAST, FL 32164			ή·	— <u>UOLIDOO</u> 23 2717/0 0 -00	295 9 002-005 150.00		
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NAME Street address	WEED, KATHRYN 48 WESTFIELD LANE	I.						
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 12. I hereby of indicated 	certify that the information supplies with a on this report or supplemental teneries in portation or the receiver or trustees supply or on an attachment with an active say.	this filing does not qualify for the examp true and accurate and that my signature	ition stated in Sec shall have the sa	ition 119.07(3)(i), Flori ame legal effect as if i	ida Statutes. I furth made under oath: t	er certify that the information hat I am an officer or director		
of the con	poration or the receiver or trust less in by	wered to execute this report as required ith all other like empowered.	by Chapter 607,	Florida Statutes, and	that my name app	ears in Block 10 or Block 11 if		
S. Milgad)	1/11/0	1/ Jonal		1		}		
SIGNATURE: 2(15/05 (386) 931-2481								