## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000081579

Entity Name: KSF DESIGNS INC.

FILED May 02, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1802 SOUTH FISKE BLVD. 6453 FLORA VISTA PLACE SUITE 105, ROOM 2 COCOA, FL 32926

ROCKLEDGE, FL 32955

Current Mailing Address: New Mailing Address:

1802 SOUTH FISKE BLVD. 6453 FLORA VISTA PLACE SUITE 105 ROOM 2 COCOA FL 32926

SUITE 105, ROOM 2 COCOA, FL 32926 ROCKLEDGE, FL 32955

FEI Number: 11-3733281 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FULLWOOD, SIMMIONE
5692 STAR RUSH DR.
APT. 207
MELBOUREN, FL 32940 US

FULLWOOD, SIMMIONE
6453 FLORA VISTA PLACE
COCOA, FL 32926 US

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: SIMMIONE FULLWOOD 05/02/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO () Delete Title: (X) Change ( ) Addition FULLWOOD, SIMMIONE FULLWOOD, SIMMIONE Name: Name: 5692 STAR RUSH DR., APT. 207 6453 FLORA VISTA PLACE Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: COCOA, FL 32926

Title: PRE. ( ) Delete Title: PRE. (X) Change ( ) Addition Name: FULLWOOD, KENDRICK Name: FULLWOOD, KENDRICK

Address: 5692 STAR RUSH DR., APT. 207 Address: 6453 FLORA VISTA PLACE
City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: COCOA, FL 32926

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: SIMMIONE FULLWOOD CEO 05/02/2005