FILED
Jun 06, 2005 8:00 am
Secretary of State
04-28-2005 90165 022 ***150.00

66021552

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000083031

1. Entity Name
KEVERN PROPERTIES, INC.

Principal Place of Business	Mailing Address
RICHMOND HOUSE ST JULIAN'S AVENUE, ST. PETER PORT GUERNSEY GY1 1 GZ, XX	RICHMOND HOUSE ST JULIAN'S AVENUE, ST. PETER PORT GUERNSEY GY1 1 GZ, XX

04112005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
	WHITE OAKS OAK ROAD
Suite, Apt. #, etc.	Suite, Apt. #, etc. MACCLESFIELD
City & State	City & State CHESHIRE -
Zip / Country	Zip: SK10 4RA Country: U.K

4. FEI Number 20-1179410 — Applied For ☐ Not Applicable ☐

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ATRIUM REGISTERED AGENTS, INC. 1500 SAN REMO AVENUE SUITE 125 CORAL GABLES, FL 33146	Name: MATTHEW L BELL CPA, PA Street Address (P.O. Box Number is Not Acceptable): 3043 SHADY WOOD LANE LAKE WALES City: FL Zip Code: 33898

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: Matthew L Bell .
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing) DATE

FILE NOW!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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	PSD HALL, ROY ST JULIAN AVENUE, ST PETER PORT GUERNSEY GY1 1 GZ,	☑ Delete	ROY HALL WHITE OAKS OAK ROAD MOTTRAM ST ANDREW MACCLESFIELD CHESHIRE SK10 4RA — U.K	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HALL, REGINA ST JULIAN AVENUE, ST PETER PORT GUERNSEY GY1 1 GZ,	☑ Delete	REGINA L HALL WHITE OAKS OAK ROAD MOTTRAM ST ANDREW MACCLESFIELD CHESHIRE SK10 4RA — U.K.	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: [signature] April 25th 2005 01144 1625 827338
SIGNATURE AND TYPED OR PRINTED NAME OF REPORTING OFFICER OR DIRECTOR Date Telephone Number