## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AP) "

## FILED Aug 01, 2007 08:00 AM Secretary of State DOCUMENT #P04000091766 KENWOOD PLAZA REALTY, INC. Principal Place of Business Mailing Address 2626 5TH AVE N SAINT PETERSBURG FL 33713 111 7TH AVENUE ST. PETE BEACH FL 33706 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #. etc. 2nd MOORE CR2E034 (4/07) City & State 4. FEI Number Applied For City & State 74-3132970 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DIAZ, JOSEPH L Street Address (P.O. Box Number is Not Acceptable) 2522 WEST KENNEDY BOULEVARD **TAMPA FL 33609** Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Repisterent Agent eignature required when reinstating) FILE NOW!!! FEE IS:\$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 5, 2007 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. DPVS TITLE ☐ Delete ☐ Change ☐ Addition CURRY, CHERYL NAME NAME U00000771124 STREET ADDRESS 2626 5TH AVENUE NORTH STREET AUDRESS 08/01/07-80005-021 550.00 ST PETERSBURG FL 33713 CITY-ST-ZIP CITY-ST-ZIP Change TITLE □ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIE Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP THILL Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

The information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information inclomental 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 stee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if with all other like empowered.

CITY-ST-ZIP

CR2E034 (4/07)

"NOUNE

- July numberton

1/25/07 (127)322-8700