2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 17, 2006 8:00 am Secretary of State DOCUMENT # P04000098336 04-17-2006 90359 028 ***150.00 CASEY AND KEN INC. Principal Place of Business Mailing Address 11171 105TH AV 11171 105TH AV LARGO, FL 33778 LARGO, FL 33778 11247 -51st Ave. N. 3. Mailing Address 11247-51st Ave. N. Suite, Apt. #, etc. Suite, Apt. #, etc. 04062006 CR2E034 (11/05) Cha-P City & State City & State 4. FEI Number Applied For St. Petersburg, FL St. Petersburg, FL 20-1314815 Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 33708 33708 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Kenneth L. Daniels PRUITT, CASEY B Street Address (P.O. Box Number is Not Acceptable) 11171 105TH AV LARGO, FL 33778 11247 - 51st Ave. N. City Zip Code St. Petersburg 33708 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. Kenneth L. Daniels 4-6-2006 (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Р TITLE TITLE Delete ☐ Change ■ Addition PRUITT, CASEY B NAME STREET ADDRESS 11171 105TH AV STREET ADDRESS CITY+ST-ZIP LARGO, FL 33778 CITY-ST-ZIP TITLE ☐ Delete TITLE **PSTD** ☐ Addition NAME DANIELS, KENNETH L NAME Daniels Kenneth L. STREET ADDRESS 11247 51ST AV N STREET ADDRESS 11247 51st Ave N. CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG, FL 33708 St. Petersburg, FL 33708 Defete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME SHEEL ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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, wilp another like empowered.

Kenneth L. Daniels, President 4/6/06

FILED