2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 05, 2005 8:00 am Secretary of State

DOCUMENT # P04000099174 1. Entity Name KINSWORTH, INC.						07-05-2	2005 902	224 025 ***1.	50.00
Principal Place of Business Mailing Address					ፈክበρ1410				
1210 S.E. 1ST STREET BOYNTON BEACH, FL 33435		1210 S.E. 1ST STREET BOYNTON BEACH, FL 33435							
2. Principal Place of Business 3000 N. UN WEAS TO DE 3. Mailing Address 3000 N. UN WEAS TO DE 3000 N UNIVERSE				•					
Suite, Apt. #, etc.		Suite, Apt, #, etc.		-	06082005	Chg-P	CR	2E034 (10/03)	
CORN SPRINGS FO		CORAL SPRINGS			4. FSI Numb	13304	76		plied For t Applicable
^{Zip} 330		33077·1210	Country		5. Certificate	of Status Desir		\$8.75 Add Fee Required	litional
	6. Name and Address of Current F	Name	7. Name and Address of New Registered Agent						
ELLSWORTH, SCOTT 1210 S.E. 1ST STREET BOYNTON BEACH, FL 33435				Street Address (P.O. Box Number is Not Acceptable) 3000 NUNIVERS, to DE					
	. ,		City	C	500			TI Zie Gode	9 —
8. The above named gritity submits this statement for the propose of changing its registered office or register						oth, in the State	of Florida. I	am familiar with,	and accept
the obligations of legistreed egent.									
SIGNATURE Supplicate, typed of pure of name of registered applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Due by September 7, 2005 1 Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND C	DIRECTORS	11.		ADDITIONS	/CHANGES TO	OFFICERS .	AND DIRECTORS	3 IN 11
TITLE NAME	PD ELLSWORTH, SCOTT	☐ Delete	TITLE NAME					Change (☐ Addition
STREET ADDRESS	1210 S.E. 1ST STREET		STREET ADDRESS	300	> W. UN	vors. too	LE		
CITY-ST-ZIP	BOYNTON BEACH, FL 33435		CITY-ST-ZIP	C=	MAL S	PRINGS	<u> </u>	33065	
TITLE NAME	VD ATKINS, MARK	Delete	TITLE NAME			, ,		Change	☐ Addition
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CITY-ST-ZIP	BOYNTON BEACH, FL 33435		CITY-ST-ZIP	<u></u>	· CAC S	PRING	R 3	3062	
TITLE NAME		☐ Delcte	TITLE NAME			, ,		☐ Change	Addition
STREET ADDRESS CITY+ST+ZIP			STREET ADDRESS City-St-Zip						
TITLE		☐ Delete	TITLE	-				☐ Change	Addition
NAME			NAME						_
STREET ADDRESS CITY+ST-ZIP			STREET ADDRESS CITY-ST-ZIP						,
TITLE		☐ Delete	TITLE					☐ Change	Addition
NAME STREET ADDRESS			NAME STREET ADDRESS						
CITY-ST-ZIP		_	CITY-ST-ZIP						1
TITLE	5 .	☐ Delete	пц					☐ Change	Addition
NAME STREET ADDRESS			NAME STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
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 frustee 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 play like impowered.									

ATTACHMENT ... 26061476

M A S PO BOX 771210

Coral Springs, Fl. 33077-1210 954-346-7288 - Broward 954-346-7217 Fax 305-621-9382 - Dade

06/30/05

Florida Department of State PO BOX 1500 Tallahassee, Fl. 32302-1500

Re: Kinsworth, Inc.

Doe# P04000099174

To Whom It May Concern:

We are enclosing a request for the reinstatement of our client, Kinsworth, Inc. and have included the notice the fee was paid, but have not included the penalty due to our client not having received the corporate annual renewal documents because of an incorrect and change of address.

our assistance in the procedures to pay the corporate renewal.

Based upon the failure of our client to receive the renewal form due to an address.

Change, we are therefore formally requesting an acceptance of the renewal form without penalty.

Should you have any questions, please contact my office.

Thank you, Sincerely,

David Hernandez