2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

FILED Apr 22, 2008 08:00 AN Secretary of State **DOCUMENT # P05000007199** 1. Entity Name KB LÁWN & LANDSCAPING, INC Mailing Address Principal Place of Business 8845 US HWY 301 8845 US HWY 301 WILDWOOD, FL 34785 WILDWOOD, FL 34785 US 01282008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 86-1127368 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required-5. Name and Address of Current Registered Agent BURKE, KEVIN W DO NOT WRITE 8845 N. US HWY 301 WILDWOOD, FL 34785 IN THIS SPACE B. 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent algorithms required when reinstaling) DATE U00000913503 9. Election Campaign Financing MFILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be 05/08/08-80019-001 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE BURKE, KEVIN NAME 8845 US HWY 3019 STREET ADDRESS WILDWOOD, FL 34785 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THIE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-51-71P TITLE NAME . STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this tiling does the quality for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is the bad accurate and that my signature shall have the same legal affect as if made under certh; that I am an officer or director of the corporation or the receiver or trusted 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 given like impowered.

ID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR