


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000011391 1. Entry Name K P HOME IMPROVEMENT, INC.	
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Principal Place of Business 760 REDFIN DR ATLANTIC BEACH, FL 32233	Mailing Address 760 REDFIN DR ATLANTIC BEACH, FL 32233
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DO NOT WRITE IN THIS SPACE



03042008 No Chg-P CR2E034 (11/05)

4. FEI Number 75-3238682	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent STRONG, RONALD L 16 SEMINOLE ROAD ATLANTIC BEACH, FL 32233

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	UD00000903870 04/30/08-80063-011 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVP WOJNAROWICZ, KRZYSZTOF P 760 REDFIN DR ATLANTIC BEACH, FL 32233
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WOJNAROWICZ, KRZYSZTOF P 760 REDFIN DR ATLANTIC BEACH, FL 32233
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE: Krzysztof P. Wojnarowicz 04.15.08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #