2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000082253

FILED Jan 10, 2006 Secretary of State

Entity Name: KYLOR INC.	·
Current Principal Place of Business:	New Principal Place of Business:
1461 BANKS ROAD MARGATE, FL 33063	
Current Mailing Address:	New Mailing Address:
P O BOX 936012 MARGATE, FL 330936012	
FEI Number: 65-0667671 FEI Number Applied For (() FEI Number Not Applicable () Certificate of Status Desired (X)
Name and Address of Current Registered Age	ent: Name and Address of New Registered Agent:
SINCLAIR, DOUGLAS B 1461 BANKS ROAD MARGATE, FL 33063 US	
The above named entity submits this statement fo in the State of Florida.	or the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registere	ed Agent Date
Election Campaign Financing Trust Fund Contribution ().
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: D () Delete Name: SINCLAIR, DOUGLAS B Address: 1461 BANKS ROAD	Title: P (X) Change () Addition Name: SINCLAIR, DOUGLAS B Address: 1461 BANKS ROAD

City-St-Zip: MARGATE, FL 33063 City-St-Zip: MARGATE, FL 33063

() Delete Title: (X) Change () Addition

GRAHAM, MARGRET D GRAHAM, MARGRET D Name: Name: Address: 1461 BANKS ROAD Address: 1461 BANKS ROAD MARGATE, FL 33063 City-St-Zip: MARGATE, FL 33063 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS SINCLAIR **PRES** 01/10/2006