2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000083268

FILED Apr 28, 2006 Secretary of State

Entity Name: KIMBERLY STROHM INC. **Current Principal Place of Business: New Principal Place of Business:** 2203 APPLETON CT PALM BEACH GARDENS, FL 33403 **Current Mailing Address: New Mailing Address:** 2203 APPLETON CT PALM BEACH GARDENS, FL 33403 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. BLOOME, GARY CPA 1840 SW 22ND ST. 22242 WÓODSET LANE 4TH FLOOR US BOCA RATON, FL 33428 MIAMI, FL 33145 US 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. SIGNATURE: GARY BLOOME 04/28/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PVST** () Delete Title: () Change () Addition STROHM, KIMBERLY Name: Name: 2203 APPLETON CT Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33403 City-St-Zip: () Delete Title: Title: () Change () Addition Name: STROHM, KIMBERLY Name: 2203 APPLETON CT Address: Address: PALM BEACH GARDENS, FL 33403 City-St-Zip: 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: KIMBERLY STROHM PVST 04/28/2006