

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000121682

Entity Name: KASS & LEX, INC.

FILED  
Feb 14, 2008  
Secretary of State

## Current Principal Place of Business:

6448 NW FOXGLOVE STREET  
PORT ST LUCIE, FL 34986

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 882251  
PORT ST LUCIE, FL 34988

## New Mailing Address:

FEI Number: 25-1925966

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

WILLIAM PETIT  
6448 NW FOXGLOVE STREE  
PORT ST LUCIE, FL 34986 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: WILLIAM PETIT

02/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PETIT, WILLIAM I  
Address: 6448 NW FOXGLOVE STREET  
City-St-Zip: PORT ST LUCIE, FL 34986

Title: VS ( ) Delete  
Name: NEPTUNE, SHARINE  
Address: 6448 NW FOXGLOVE STREET  
City-St-Zip: PORT ST LUCIE, FL 34986

Title: T ( ) Delete  
Name: PETIT, KASSANDRA N  
Address: 6448 NW FOXGLOVE STREET  
City-St-Zip: PORT ST LUCIE, FL 34986

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM PETIT

ED

02/14/2008

Electronic Signature of Signing Officer or Director

Date