


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 01, 2006 8:00 am**  
**Secretary of State**

08-01-2006 90002 048 \*\*\*150.00

<b>DOCUMENT # P06000000156</b> 1. Entity Name <b>KANDO KITCHEN INC.</b>					
Principal Place of Business <b>24 WELLING LANE PALM COAST, FL 32164</b>		Mailing Address <b>24 WELLING LANE PALM COAST, FL 32164</b>			
2. Principal Place of Business <b>328 Jay Road</b> <small>Suite, Apt. #, etc.</small>		3. Mailing Address <b>213 Cardinal DR</b> <small>Suite, Apt. #, etc.</small> <b>Apt B</b>			
<small>City &amp; State</small> <b>South Daytona FL</b>		<small>City &amp; State</small> <b>Ormond Beach FL</b>			
<small>Zip</small> <b>32119</b>		<small>Country</small> <b>Volusia</b>		<small>Zip</small> <b>32176</b>	
<small>Country</small> <b>Volusia</b>		<small>Country</small> <b>Volusia</b>			
6. Name and Address of Current Registered Agent <b>KANSKI, JAMIE 24 WELLING LANE PALM COAST, FL 32164</b>				7. Name and Address of New Registered Agent <small>Name</small> <small>Street Address (P.O. Box Number is Not Acceptable)</small> <small>City</small> <b>FL</b> <small>Zip Code</small>	
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 _____					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<b>P</b> <b>KANSKI, JAMIE</b> <b>24 WELLING LANE</b> <b>PALM COAST, FL 32164</b>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<b>P</b> <b>Kanski, Jamie</b> <b>213 Cardinal DR Apt B</b> <b>ORMOND BEACH FL 32176</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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 no other like empowered.					
SIGNATURE: <u>Jamie Kanski</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			6/24/06 (386) 627-3199 <small>Date Daytime Phone</small>		

00043701



06212006 Chg-P CR2E034 (11/05)

4. FEI Number ☒ Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**FILE NOW!!! FEE IS \$550.00  
Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

## 10. OFFICERS AND DIRECTORS

<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<b>P</b> <b>KANSKI, JAMIE</b> <b>24 WELLING LANE</b> <b>PALM COAST, FL 32164</b>	<input type="checkbox"/> Delete
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>		<input type="checkbox"/> Delete
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## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<b>P</b> <b>Kanski, Jamie</b> <b>213 Cardinal DR Apt B</b> <b>ORMOND BEACH FL 32176</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE: Jamie Kanski 6/24/06 (386) 627-3199  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

# ATTACHMENT

50023701  
#PO6000000156

To whom it may concern;

I had filled out the Annual Report previously sent to me. It had gotten miss place inbetween moving. I had recieved another copy which I am send with this note. I would appreciate if you would not fine me for the late fee. I'm still trying to get my company up and going

Sincerely,

KanDo Kitchen inc.

*Francis Kanali*

6/29/06