

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000009051

FILED  
Apr 18, 2008  
Secretary of State

Entity Name: K & N VENTURE CAPITAL, CORP.

## Current Principal Place of Business:

8001 N. DALE MABRY HWY.  
BUILDING 401  
TAMPA, FL 33614 US

## New Principal Place of Business:

12731 TROWBRIDGE LANE  
TAMPA, FL 33624 US

## Current Mailing Address:

8001 N. DALE MABRY HWY.  
BUILDING 401  
TAMPA, FL 33614 US

## New Mailing Address:

12731 TROWBRIDGE LANE  
TAMPA, FL 33624 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YOUNG & ASSOCIATES  
8001 N. DALE MABRY HWY  
BUILDING 401  
TAMPA, FL 33614 US

## Name and Address of New Registered Agent:

KASPI, NICOLE J  
12731 TROWBRIDGE LANE  
TAMPA, FL 33624 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: NICOLE KASPI

04/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KASPI, NICOLE J  
Address: 8001 N. DALE MABRY HWY, BUILDING 401  
City-St-Zip: TAMPA, FL 33614 US

Title: VP ( ) Delete  
Name: KASPI, MORDECHAY M  
Address: 8001 N. DALE MABRY HWY, BUILDING 401  
City-St-Zip: TAMPA, FL 33614 US

Title: S (X) Delete  
Name: YOUNG, ZIZI  
Address: 8001 N. DALE MABRY HWY, BUILDING 401  
City-St-Zip: TAMPA, FL 33614 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: KASPI, NICOLE J  
Address: 12731 TROWBRIDGE LANE  
City-St-Zip: TAMPA, FL 33624 US

Title: VP (X) Change ( ) Addition  
Name: KASPI, MORDECHAY M  
Address: 12731 TROWBRIDGE LANE  
City-St-Zip: TAMPA, FL 33624 US

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: NICOLE KASPI

P

04/18/2008

Electronic Signature of Signing Officer or Director

Date