2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2009
Secretary of State

DOCUMENT# P08000044924

Entity Name: KAYAKS BY BO, INC.

Current Principal Place of Business:

519 GARDEN STREET
TITUSVILLE, FL 32796

New Principal Place of Business:

515 GARDEN STREET
TITUSVILLE, FL 32796

Current Mailing Address:

519 GARDEN STREET
TITUSVILLE, FL 32796

New Mailing Address:

3 INDIAN RIVER AVENUE
505
TITUSVILLE, FL 32796

FEI Number: 26-2516738 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALTIF, THOMAS A
3 INDIAN RIVER AVENUE UNIT 505
TITUSVILLE, FL 32796 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALTIF, THOMAS A
Address: 519 GARDEN STREET
City-St-Zip: TITUSVILLE, FL 32796

Title: S ( ) Delete
Name: ALTIF, LINDA B
Address: 519 GARDEN STREET
City-St-Zip: TITUSVILLE, FL 32796

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALTIF, THOMAS A
Address: 5 INDIAN RIVER AVENUE # 505
City-St-Zip: TITUSVILLE, FL 32796

Title: S (X) Change ( ) Addition
Name: ALTIF, LINDA B
Address: 3 INDIAN RIVER AVENUE # 505
City-St-Zip: TITUSVILLE, FL 32796

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: THOMAS A. ALTIF PRES 05/06/2009
Electronic Signature of Signing Officer or Director — Date