## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000071395

Address:

City-St-Zip:

FILED Jan 28, 2009 Secretary of State

Entity Name: KENNI	ETH D INC.				
Current Principal Place of Business:		New Principal Place of Business:			
3704 WEST OAKLANI LAUDERDALE LAKES					
Current Mailing Address:		New Mailing Address:			
2800 E SUNRISE BLV	D				
19D FORT LAUDERDALE,	FL 33304				
FEI Number: 26-3073018	FEI Number Applied For ( )	FEI Number Not Appl	licable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and	Name and Address of New Registered Agent:		
GOODWIN, GINA L 10000 SW 52 AVE #69 GAINESVILLE, FL 320	608 US				
The above named enti in the State of Florida.	ty submits this statement for the p	ourpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATURE:					
Elect	ronic Signature of Registered Age	ent		Date	
Election Campaign Finan	cing Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:		( ) Change (X) Addition LISA JRISE BLVD. 19D FL 33304 US	
Title: Name:	( ) Delete	Title: Name:	PRES GOODWIN,	( ) Change (X) Addition KENNETH F	

Address:

PO BOX 100639 City-St-Zip: FT. LAUD., FL 33310 US

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: LISA GOODWIN **PRES** 01/28/2009