FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

3: 11

FLORIDA

DOCUMENT # **P92000011901 (5)**

1. **K.P.R.S., INC.**

8509 ALTON AVE.
JACKSONVILLE FL 32211

8509 ALTON AVE.
JACKSONVILLE FL 32211

3. 12/15/1992

3a. Date of Last Report: 08/02/1994

2. 21 Same as above

2a. 26 same as above

4. FEI Number: 59-3156509 — Applied For / Not Applicable

22 / 27

5. Certificate of Status Desired — $8.75 Additional Fee Required

23 / 28

6. Limited Company Amendment / Trust Fund Contribution — $5.00 May Be Added to Fees

24 / 25 / 29 / 30

8. Is this corporation filing for the purpose of changing its registered office or registered agent, or both, in the state of Florida? [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

PEAK, KEVIN T
8509 ALTON AVE.
JACKSONVILLE FL 32211

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, Florida Statutes, 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. The above named entity is aware that any net effect of this statement must be that the entity maintain a registered office and a registered agent in the state of Florida.

SIGNATURE

12. OFFICER AND DIRECTOR DATA

PTD
PEAK, KEVIN T.
8509 ALTON AVENUE
JACKSONVILLE FL

13. ADDITIONAL CHANGES TO OFFICER AND DIRECTOR DATA

[ ] Change [ ] Addition

14. I declare, certify, that the information required by Part A of the Florida Limited Liability Company Act, Florida Statutes, is true and correct. I am aware that false information submitted in a document to the Department of State for the purpose of obtaining or maintaining registration as a foreign limited liability company is a felony under section 817.155, Florida Statutes. I understand the requirement to designate a registered agent and registered office in Florida and agree to comply with the provisions of Florida law so long as I am qualified to do business in this state.

SIGNATURE: [signature]

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/17/2004

DATE

0017319 CP