2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 20, 2005 08:00 AM Secretary of State

| | | | | - Saawatawy at State | |
|---|---|--|--|---|--|
| DOCUMENT # P93000040220 1. Entity Name K&M YBOR, INC. | | | | Secretary of State | |
| Principal Place of Business Mailing Address 1718 E 7TH AVE 1718 E 7TH AVE SUITE 301 SUITE 301 TAMPA, FL 33605 TAMPA, FL 33605 | | 1718 E 7TH AVE SUITE 301 | | | |
| С | OO NOT WRITE II | | CE | 04132005 No Chg-P CR2E034 (10/03) 4. FEI Number | |
| MCKEE, ROBERT F 1718 E. SEVENTH AVENUE SUITE 301 TAMPA, FL 33605 | | | | DO NOT WRITE IN THIS SPACE | |
| 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 Signature, typed or printed name of registered agent and talle of applicable. (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. | | | | | |
| | 600/4500 A) IS NISS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D KELLY, MARK F 3102 COACHMAN AVE_ TAMPA, FL 34611 | | | - LIDDOGGGGGGGGGGG | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | === == | DO NOT WRITE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | IN THIS SPACE | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| 12. I hereby of indicated of the corrections | certify that the information supplied with this fill on this report or supplemental report is true a poration or the receiver or trustee empoweres or on an attachment with an address with all | ling does not qualify for the exer and accurate and that my signate the execute this report as required other like empowered. | nption stated in Secure shall have the secure 607, | ction 119.07(3)(i), Florida Statutes, I further certify that the information same legal effect as if made under oath; that I am an officer or director, Florida Statutes, and that my name appears in Block 10 or Block 11 if | |