

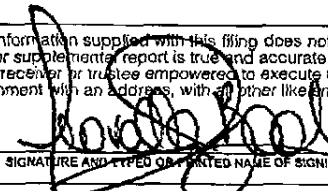


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

- FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000062737			
1. Entity Name KIOSKO, INC.			
Principal Place of Business 1601 NW 70TH AVENUE MIAMI, FL 33178 US		Mailing Address P O BOX 59-3515 MIAMI, FL 33159 US	
DO NOT WRITE IN THIS SPACE			
			
		04032006 No Chg-P CR2E034 (11/05)	
4. FEI Number 65-0438731		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BOOTH, ROBERT 1601 NW 70TH AVENUE MIAMI, FL 33126		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		U000000495201 04/20/06-60075-023 150.00	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BOOTH, ROBERT 1601 NW 70TH AVENUE MIAMI, FL 33126		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BOOTH, FIORELLA 1601 NW 70TH AVENUE MIAMI, FL 33126		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
DO NOT WRITE IN THIS SPACE			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		FIORELLA BOOTH 04/03/06 (305) 591-7363	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date City/State Phone #</small>	