2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P9400000119

Entity Name: KABOOL & ASSOCIATES, INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5500 COMMERCE DRIVE, #3 5500 COMMERCE DRIVE. ORLANDO, FL 32839

SUITE 3

ORLANDO, FL 32839

Current Mailing Address: New Mailing Address:

P O BOX 560876

ORLANDO, FL 328560876

FEI Number: 59-3215635 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KABOOL, ANGELA KABOOL, ANGELA MS 5500 COMMERCE DR 5500 COMMERCE DR ORLANDO, FL 32839 US ORLANDO, FL 32839 US

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: ANGELA KABOOL

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

04/27/2006

Title: () Delete Title: (X) Change () Addition KABOOL, ANGELA KABOOL, ANGELA MS Name: Name:

22 OCEAN CREST DRIVE 22 OCEAN CREST DRIVE Address: Address: City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: ORMOND BEACH, FL 32176

Title: Title: () Delete () Change () Addition Name:

KABOOL, JEFFREY Name: 1315 RIDGECREST RD Address: Address: ORLANDO, FL 32806 City-St-Zip: City-St-Zip:

() Delete Title: Title: ST (X) Change () Addition

HULCHER, RITA Name: HULCHER, RITA MS Name: 3117 LAKE MAR LN 3117 LAKE MAR LN Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32806

I hereby certify that the information supplied with this filing does not qualify for the 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: RITA HULCHER ST 04/27/2006