2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 24, 2008 8:00 am Secretary of State

ANNOAL REPORT						Secretary of State				
1. Entity Nam	ю	#P9400001 OF KENDALL, INC			4		90047 006 ***			
Principal Place	e of Business		Mailing Address] -				
12755 SW 88 ST			12755 SW 88 ST			•				
MIAMI, FL 33186			MIAMI, FL 33186							
thinwai, i.e. 50,700			1111 WWW, 1 C 00 700							
2 Principal P	lace of Busine	ess - No P.O. Box #	3 Mailing Address	3. Mailing Address						
z. macipari	idea of Basine	333 - 140 7 , O. BOX #	V. Waling Address					II NTINE IINTI IITIN ISIEI NII	i)) (811016)) (811)	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02272008	Chg-P	CR2E034 (12/	06)	
City & State			City & State			4. FEI Numb		-	Applied For Not Applicable	
Zip	Country		Zip Countr		try		of Status Desired		Additional	
	6. Name	Registered Agent	egistered Agent			Fee Required 7. Name and Address of New Registered Agent				
6. Name and Address of Current Registered Agent Nam						7. (44)(10 4)		agrateros Agent		
SAAVEDRA, JAVIER						D O D - N				
12755 SW				S			Street Address (P.O. Box Number is Not Acceptable)			
MIAMI, FL	33100									
	•				City			FL Zip	Code	
The above named entity submits this statement for the purpose of changing its registered					office or registered	agent, or both	i n the State of Flo	1	ith, and accept	
the obligations of registered agent.										
SIGNATURE								OME		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renstating) OATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.										
	사건 2-1일:	OFFICERS AND	DIRECTORS		ADDITIONS	 CHANGES TO OFFI	CERS AND DIRECTO	2RS (N 11		
	A.P.D					7.551110110	, 0, 11 0, 0, 0, 1	☐ Char		
NAME SAAVEDRA, JAVIER				NAME						
STREET ADDRESS 12755 SW 88 ST.				STREET #						
CITY-ST-ZIP MAMI, FL 33186			CITY-		'-ST-ZIP					
TITLE	S		☐ Delete					Char	nge 🗌 Addition	
NAME	1	RA, MARIA J		NAMI						
STREET ADDRESS CITY-ST-ZIP	12755 SW MIAMI, FL				EET ADDRESS '- ST - ZIP					
TITLE	VP	. 33100	□ Poleto	☐ Delete TITLE				☐ Char	- C sastico	
NAME	SAAVEDR	RA, BRENDA	SISISO C3	NAM				L. Cital	nge 🔲 Addition	
STREET ADDRESS	12755 SW	/ 88 ST		STRE	EET ADDRESS					
CITY-ST-ZIP	MIAMI, FL 33186		CITY		'-ST-ZIP					
TITLE	VP		☐ Delete	TITL	E			☐ Char	nge 🔲 Addition	
NAME	1	RA, JESSICA M		NAM						
STREET ADDRESS CITY-ST-ZIP	12755 S.V MIAMI, FL				EET ADDRESS 7-ST-ZIP					
TITLE	WIIZWII, I L	. 33100	Defete	TITL				Char	nge 🗍 Addition	
NAME			☐ Desete	NAM				Char	ige Addition	
STREET ADDRESS				STRE	EET ADDRESS					
CITY+ST-ZIP				CITY	'-ST-ZIP					
TITLE			☐ Delete	TITL	£			☐ Char	nge 🗌 Addition	
NAME				NAM						
STREET ADDRESS					EET ADDRESS					
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	2000 0000 0000		/-ST-ZIP			<u> </u>	-	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statut es. 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 true 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 on the change of the										
SIGNATURE: SIGNATURE: SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Date Date Description of Signing Proces Date										
		SIGNATURE AND TYPED O	K PKIN I EU NAME OF SIGNING OFFIC	ER OR DIRE	LICK		Date	Daytime Pho	ne #	