



# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 13, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P95000001754</b> <small>1. Entity Name</small> <b>MICHAEL KAESTNER ENTERPRISES, INC.</b>					
<small>Principal Place of Business</small> <b>5363 PALMETTO STREET FT MYERS, FL 33931</b>			<small>Mailing Address</small> <b>5363 PALMETTO STREET FT MYERS, FL 33931</b>		
<small>2. Principal Place of Business - No P.O. Box #</small> Suite, Apt. #, etc.		<small>3. Mailing Address</small> Suite, Apt. #, etc.			
<small>City &amp; State</small>		<small>City &amp; State</small>			
<small>Zip</small>	<small>Country</small>	<small>Zip</small>	<small>Country</small>	<small>4. FEI Number</small> <b>65-0549596</b>	
<small>5. Certificate of Status Desired</small> <input type="checkbox"/>				<small>\$8.75 Additional Fee Required</small>	
<small>6. Name and Address of Current Registered Agent</small> <b>KAESTNER, MICHAEL 5363 PALMETTO STREET FT. MYERS BEACH, FL 33931</b>			<small>7. Name and Address of New Registered Agent</small> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code		
<small>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.</small>					
<small>SIGNATURE</small> _____ <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when submitting.) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		<small>9. Election Campaign Financing Trust Fund Contribution.</small> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D KAESTNER, MICHAEL</b> <input type="checkbox"/> Delete <b>5363 PALMETTO STREET</b> <b>FORT MYERS BEACH, FL 33931</b>		<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>U00000704387</b> <b>04/23/07-80009-005 150.00</b>	
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Delete		<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<small>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 507, 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.</small>					
<b>SIGNATURE:</b> 			Date <b>4-11-07</b> <span style="float: right;"><b>239 277-7335</b></span>		