2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 01, 2005 08:00 AM Secretary of State

DOCUMENT # P95000030927 1. Entity Name KENNETH CARUANA & ASSOCIATES, INC.		Secretary of Sta
Principal Place of Business Mailing Address 2G34 N.W. 55TH AVE. 2034 N.W. 55TH AVE. MARGATE, FL 33063 MARGATE, FL 33063	· · · · · · · · · · · · · · · · · · ·	
		03292005 No Chg-P CR2E034 (10/03)
DO NOT WRITE IN THIS SPACE		4. FEI Number 65-0575892 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
CARUANA, KENNETH 2034 N.W. 55TH AVE.		DO NOT WRITE
MARGATE, FL 33063		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 (title if applicable (NOTE Registered Agent signature required when rehastaling) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Fi	* _ **	.00 May Be 04/01/05-80022-006 150.00 ded to Fees
10. OFFICERS AND DIRECTORS TITLE D	T 12 TE 4, F 4 (3)	
NAME CARUANA, KENNETH STREET ADDRESS 2034 N.W. 55TH AVE. CITY-ST-ZIP MARGATE, FL 33063		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS		DO NOT WRITE
CITY- ST- ZIP	IN THIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP		IN THIS STACE
TITLE NAME STREET ADDRESS CITY - ST-ZIP		:
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing despinot qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this report or supplemental report is two 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 eyer like empowered.		
SIGNATURE: SIGNATURE:	RECTOR	3/24/05 954-978-9208 Date Dayline Phone #