2005 FOR PROFIT CORPORATION ANNUAL REPORT

of the corporation or the receiv changed, or on an attachment

SIGNATURE:

FILED Apr 08, 2005 08:00 AM Secretary of State **DOCUMENT # P95000072049** 1. Entity Name KATHPETE, INC. Principal Place of Business Mailing Address 2425 GULF OF MEXICO DRIVE 2425 GULF OF MEXICO DRIVE SUITE 7-A LONGBOAT KEY, FL 34228 LONGBOAT KEY, FL 34228 04052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0622953 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PETERSEN, KATHLEEN V DO NOT WRITE 2425 GULF OF MEXICO DRIVE SUITE 7-A IN THIS SPACE LONGBOAT KEY, FL 34228 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 reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PETERSEN, KATHLEEN V. NAME U00000294359 04/08/05-80067-002 150.00 STREET ADDRESS 2425 GULD OF MEXICO DRIVE SUITE 7A CITY-ST-ZIP LONG BOAT KEY, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 does not 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 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