## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

| DOCUMENT # P95000085594  1. Entity Name KFAS CO.  |  |            |          |   |     |  |  |   |                         | FILEI          |                             |            |  |
|---|--|------------|----------|---|-----|--|--|---|-------------------------|----------------|-----------------------------|------------|--|
| Principal Place   | e of Busines:  | s          | Ma       | Mailing Address                                 |     |  |  |   | 05 MAY                  | -3 Pi          | 4: 17                       | 1          |  |
| 354 HIATT DRIVE<br>PALM BEACH GARDENS, FL 33418   |  |            |          | 354 HIATT DRIVE<br>Palm Beach Gardens, FL 33418 |     |  |  | SEUNCTARY OF STATE TALLAHASSEE, FLORIDA |                         |                |                             |            |  |
| 2. Principal Place of Business  |  |            |          | 3. Mailing Address                              |     |  |  |   |                         |                |                             |            |  |
| Suite. Apt. #, etc.   |  |            |          | Suite, Apt. #, etc.                             |     |  |  | 01242005                                | 5 Chg-P CR2E034 (10/03) |                |                             |            |  |
| City & State  |  |            |          | City & State                                    |     |  |  | 4. FEI Number 65-069                    |                         | <u> </u>       | oplied For<br>ot Applicable |            |  |
| Zip   | Country  |            |          | Zip   |     | Country  |  |   | of Status Desired       |                | \$8.75 Add<br>Fee Require   |            |  |
| 6. Name and Address of Current Registered Agent   |  |            |          |   |     |  | 7. Name and Address of New Registered Agent Name |   |                         |                |                             |            |  |
| FRIEDMAN, STEVEN<br> -354 HIATT DRIVE<br>  PALM BEACH GARDENS, FL 33418   |  |            |          |   |     | Street Address (P.O. Box Number is Not Acceptable) |  |   |                         |                |                             |            |  |
| FALM DEACH GARDENS, FC 35416  |  |            |          |   |     |  |  |   |                         |                |                             |            |  |
|   |  |            |          |   |     | City   |  |   | <del></del>             | FL             | Zip Cod                     | е          |  |
| 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 in the of registered again and the Flappicable. (NOTE: Flog stered Again signature required when renationing)  DATE  |  |            |          |   |     |  |  |   |                         |                |                             |            |  |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees   |  |            |          |   |     |  |  |   |                         |                |                             |            |  |
| 10.   | Р  | OFFICERS A | ND DIREC |   | 11. |  | -  | ADDITIONS                               | CHANGES TO OF           | ICERS AND      |                             |            |  |
| NAME STREET ADDRESS CITY-ST-ZEP   | ABRAMS, MARC J   |            |          |   |     |  |  | ☐ Change ☐ Addition                     |                         |                |                             |            |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | NAME SAYRE, ROBERT STREET ADDRESS 354 HIATT DRIVE  |            |          |   |     | LE<br>ME<br>EET ADDRESS<br>Y+ST-ZIP                | 7R   | Esident                                 | -                       |                | Change                      | Addition   |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | T Delete TITL FRIEDMAN, IRVING Z NAM 101 BANYAN ISLES STR PALM BEACH GARDENS, FL 33418 CIT |            |          |   |     |  |  | □ Change □ Addition 800054530738        |                         |                |                             |            |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |            |          | ☐ De'ete  |     | i  |  |   | <del>), USU1(IS</del> I | <del>UZI</del> | ☐ Chānặe                    | L Addition |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |            |          | ☐ Delete  |     | 1  |  | H                                       | 35/10                   |                | ☐ Change                    | ☐ Addition |  |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |  |            |          | ☐ Delete  |     | - i  |  |   |                         |                | ☐ Change                    | ☐ Addition |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 changed, or on an attachment with an address, with all other like empowered. |  |            |          |   |     |  |  |   |                         |                |                             |            |  |
| SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DOIS DOIS DOISE DO DE DOISE DE  |  |            |          |   |     |  |  |   |                         |                |                             |            |  |