## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

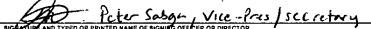
## Mar 19, 2007 08:00 Al Secretary of State **DOCUMENT # P96000013800** 1. Entity Name KASŚIS HOLDINGS, INC. Principal Place of Business Mailing Address 290 SW 12 AVE 290 SW 12 AVE DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442 01232007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0649166 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BEAVER PROPERTIES, INC DO NOT WRITE 290 SW 12 AVE DEERFIELD BEACH, FL 33442 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PΩ TITLE SABGA, JOSEPH NAME STREET ADDRESS 290 SW 12 AVE DEERFIELD BEACH, FL 33442 CITY-ST-ZIF SABGA, EMILE NAME 290 SW 12 AVE STREET ADDRESS 03/27/07-80108-018-150.00 CITY-ST-ZIP DEERFIELD BEACH, FL 33442 TITLE SABGA, STEVEN PAUL NAME 290 SW 12 AVE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP DEERFIELD BEACH, FL 33442 IN THIS SPACE TITLE SABGA, GEORGE STREET ADDRESS 290 SW 12 AVE DEERFIELD BEACH, FL 33442 CITY-ST-ZIP TITLE NAME SABGA, PETER 290 SW 12 AVE STREET ADDRESS

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 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DEERFIELD BEACH, FL 33442





FILED