

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 12, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000093240**

1. Entity Name  
**KORBIN SYSTEMS, INCORPORATED**



Principal Place of Business  
**924 CENTRAL AVENUE  
FORT WALTON BEACH, FL 32547**

Mailing Address  
**924 CENTRAL AVENUE  
FORT WALTON BEACH, FL 32547**



01072004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3422127**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**YATES, JANICE W  
924 CENTRAL AVENUE  
FORT WALTON BEACH, FL 32547**

**DO NOT WRITE  
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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PDC
NAME	KAIN, JAMES E
STREET ADDRESS	2575 CAYENNE DR
CITY - ST - ZIP	SHALIMAR, FL 32579
TITLE	VSD
NAME	YATES, CHARLES W
STREET ADDRESS	924 CENTRAL AVE.
CITY - ST - ZIP	FORT WALTON BEACH, FL 32547
TITLE	S
NAME	YATES, JANICE W
STREET ADDRESS	924 CENTRAL AVE
CITY - ST - ZIP	FORT WALTON BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000000002544  
01/13/04-80019-006 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**

*Janice W. Yates* *Janice W. Yates*

*1/7/04*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE