

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 27, 2005 8:00 am**  
**Secretary of State**

05-27-2005 90022 025 \*\*\*150.00

<b>DOCUMENT # P97000021001</b>					
<b>1. Entity Name</b> M & S KESEF, INCORPORATED					
<b>Principal Place of Business</b> 11523 S DIXIE HWY PINECREST, FL 33156			<b>Mailing Address</b> 11523 S DIXIE HWY PINECREST, FL 33156		
<b>2. Principal Place of Business</b> 701 Washington Avenue Suite, Apt. #, etc.		<b>3. Mailing Address</b> 701 Washington Ave Suite, Apt. #, etc.			
<b>City &amp; State</b> miami beach, fl.		<b>City &amp; State</b> miami beach, fl		<b>4. FEI Number</b> 65-0736898	
<b>Zip</b> 33133 <b>Country</b>		<b>Zip</b> 33133 <b>Country</b>		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> PETEL, MOSHE 11523 S DIXIE HWY PINECREST, FL 33156			<b>7. Name and Address of New Registered Agent</b> Name: <u>ARVIN PELTZ</u> Street Address (P.O. Box Number is Not Acceptable): <u>3250 Mary St.</u> Suite <u>500</u> City: <u>miami</u> <b>FL</b> <b>Zip Code</b> <u>33133</u>		
<b>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.</b> SIGNATURE: <u>ARVIN PELTZ</u> <span style="float: right;">5/16/05</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 7, 2005</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>D</b> PETEL, MOSHE 11523 S DIXIE HWY PINECREST, FL 33156	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	VP/S/D 701 Washington Avenue miami beach, fl 33139	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>D</b> SOLOMON, SPURGEON F 11523 S DIXIE HWY PINECREST, FL 33156	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	P/T/AS/D 701 Washington Avenue miami beach, fl. 33139	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>O</b> PANON, FELIX 495 NW 72 AVE APT #407 MIAMI, FL 33126	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	V.P. PAVON, FELIX 8065 NW 8th St. UNIT 5 MIAMI FL 33126	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	 	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>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.</b>					
<b>SIGNATURE:</b> <u>MOSHE PETEL Secy</u>		5-16-05 (305) 490-9796			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone *</small>			

ATTACHMENT

40086076

AFFIDAVIT

Before me the undersigned authority personally appeared Moshe Petel, this 19<sup>th</sup> day of may 2005 upon being duly sworn deposes and states as follows:

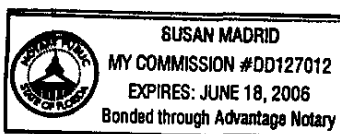
1. The undersigned is an officer and director MS & RE KESEF Corp. under Charter # P97000021001 which changed its address on about the 10<sup>th</sup> day of November 2004 from 11523 South Dixie Highway, Pinecrest, Florida 33156 to 701 Washington Avenue, Miami Beach, Florida 33139.
2. Although we notified the post office of the Company's change of address no notices were forwarded.
3. As a result Affiant did not receive any notification for the annual report for the above corporation for 2005 and only recently realized that the Annual Report was overdue and is now attempting to file this annual report. It was only through inadvertence that the Secretary of State was not immediately notified the Company's change of address and accordingly Affiant requests that the Secretary of State waive any penalty for late filing of the Annual Report.

FURTHER AFFIANT SAYETH NAUGHT.

Moshe Petel

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

I HEREBY CERTIFY that before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Moshe Petel, who is personally known to me or who provided \_\_\_\_\_ as proof of his identity, freely and voluntarily this 19<sup>th</sup> day of may, 2005.



Notary Public, State of  
Florida at Large