## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 28, 2005 08:00 AM Secretary of State

(727) 420-0047 Daytma Phone #

DOCUMENT # P97000040128  1. Entity Name KENNY BREON ENTERPRISES, INC.				Secretary of State		
6100-40 AV	ce of Business /ENUE NORTH BURG, FL 33709	Mailing Address 6100-40 AVENUE NORTH ST. PETERSBURG, FL 33709		( 1881   1881   1811   1811   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881	NICS NIGST ANING COURS (INNS) FRIUNCI (A 1880)	
	OO NOT WRITE		CE	04252005 No Chg-P CR2E034 (10/03)  4. FEI Number		
	6. Name_and Address of Current Re NM JR ARANDA AVENUE E, FL 33777-3619	gistered Agent	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 NOWILL FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.				00 May Be ad to Fees	-	
10.	OFFICERS AND DI	RECTORS		· · · · · · · · · · · · · · · · · · ·		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BERON, KENNY 6100-40 AVE. NORTH ST. PETERSBURG, FL 33709					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ZEOLI, SAM JR 8413 JACARANDA AVENUE LARGO, FL 33777	U00000338650 04/28/05-80043-024 150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S METCHER, JOYCE D 610040 AVE N SAINT PETERSBURG, FL 33709		DO NOT WE	RITE		
TITLE NAME STREET ADDRESS CITY-S1-ZIP				IN THIS SPA	ACE	
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)(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 path; 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 BYLON 4-26-05