## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

## FILED Apr 11, 2005 08:00 AM Secretary of State DOCUMENT # P98000088591 1. Entity Name K.C. SHOPPING, INC. Principal Place of Business -Mailing Address 8100 S.W. 81ST DRIVE., #210 8100 S.W. 81ST DRIVE., #210 MIAMI, FL 33143 MIAMI, FL 33143 02142005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0875332 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HECHTMAN, BARRY I DO NOT WRITE 8100 S.W. 81ST DRIVE., #210 MIAMI, FL. 33143 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. SIGNĂTURE 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 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 10, OFFICERS AND DIRECTORS STD TITLE BELL, ALAN NAME STREET ADDRESS 8100 S.W. 81ST DRIVE., #210 CITY-ST-ZIP MIAMI, FL 33143 U00000298848 TITLE 04/11/05-80077-016 150.00 HECHTMAN, BARRY I NAME STREET ADDRESS 8100 S.W. 81ST DRIVE., #210 CITY-ST-ZIP MIAMI, FL 33143 TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MIL IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 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 eath; 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