

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000002884

FILED
Apr 29, 2004
Secretary of State

Entity Name: KAS INTERNATIONAL GROUP INC.

Current Principal Place of Business:

10985 HAWKS VISTA STREET
PLANTATION, FL 33324

New Principal Place of Business:

3370 NE 190TH STREET
TS 3811
AVENTURA, FL 33180

Current Mailing Address:

10985 HAWKS VISTA STREET
PLANTATION, FL 33324

New Mailing Address:

3370 NE 190TH STREET
TS 3811
AVENTURA, FL 33180

FEI Number: 65-0887734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BABANI, JAIKISHIN U
10985 HAWKS VISTA STREET
PLANTATION, FL 33324

Name and Address of New Registered Agent:

BABANI, JAIKISHIN U
3370 NE 190TH STREET
TS 3811
AVENTURA, FL 33180

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.

SIGNATURE:

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MGRD () Delete
Name: BABANI, JAIKISHIN U
Address: 10985 HAWKS VISTA STREET
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: BABANI, ANNELIE B
Address: 10985 HAWKS VISTA STREET
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MGRD (X) Change () Addition
Name: BABANI, JAIKISHIN U
Address: 3370 NE 190TH STREET, # TS 3811
City-St-Zip: AVENTURA, FL 33180

Title: D (X) Change () Addition
Name: BABANI, ANNELIE B
Address: 3370 NE 190TH STREET, # TS3811
City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNELIE B. BABANI

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date