STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS

2008 FOR PROFIT CORPORATION

Apr 02, 2008 08:00 AN Secretary of State **ANNUAL REPORT** DOCUMENT # P99000053884 K R J MARKETING, INC. Principal Place of Business Mailing Address 10130 SOUTH WEST 3RD STREET 10130 SOUTH WEST 3RD STREET PLANTATION, FL 33324 PLANTATION, FL 33324 03172008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0932306 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOHNSON, KENNETH ROY DO NOT WRITE 10130 SOUTH WEST 3RD STREET PLANTATION, FL 33324 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 trile if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE JOHNSON, KENNETH R NAME 10130 SW 3RD ST STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33324 U000008780S0 04/14/08-80039-002 150.00 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-7/P TITLE IN THIS SPACE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

FILED

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 and the execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 10 or Block 11 if

JUNUSONS PRETIDENT SIGNATURE R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR