

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Mar 10, 2005 8:00 am**  
**Secretary of State**

03-10-2005 90144 013 \*\*\*158.75

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03032005 Chg-P CR2E034 (10/03)

DOCUMENT # P99000061912			
1. Entity Name KEPAJO, INC.			
Principal Place of Business 440 4TH LANE SW VERO BEACH, FL 32962 US		Mailing Address PO BOX 651445 VERO BEACH, FL 32965	
2. Principal Place of Business 4007 US Highway 1 Suite, Apt. #, etc.		3. Mailing Address 4007 US Highway 1 Suite, Apt. #, etc.	
City & State Vero Beach FL		City & State Vero Beach FL	
4. FEI Number 65-0935596		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent KURUTZ, JOHN A 2065 DEROSA DRIVE VERO BEACH, FL 32960		7. Name and Address of New Registered Agent	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		FL Zip Code	
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: <i>John Kurutz</i> President		DATE: 3-2-05	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: P <input checked="" type="checkbox"/> Delete	NAME: KURUTZ, JOHN A	TITLE: PRES. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: KURUTZ, JOHN A
STREET ADDRESS: 440 4TH LANE SW	CITY-ST-ZIP: VERO BEACH, FL 32962	STREET ADDRESS: 4007 US1	CITY-ST-ZIP: VERO BEACH, FL 32960
TITLE: VP <input checked="" type="checkbox"/> Delete	NAME: Lewis, Sheldon	TITLE: Vice Pres <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME: LEWIS, SHELDON
STREET ADDRESS: 1070 Whitetail Avenue SW	CITY-ST-ZIP: Vero Beach, FL 32968	STREET ADDRESS: 4007 US1	CITY-ST-ZIP: VERO BEACH, FL 32960
TITLE: <input type="checkbox"/> Delete	NAME:	TITLE: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME:
TITLE: <input type="checkbox"/> Delete	NAME:	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME:
TITLE: <input type="checkbox"/> Delete	NAME:	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME:
TITLE: <input type="checkbox"/> Delete	NAME:	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME:
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.			
SIGNATURE: <i>John Kurutz</i> President		DATE: 3-2-05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #: 772-567-6776	