2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

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Aug 26, 2004 8:00 am Secretary of State 08-26-2004 90004 018 ***150.00 **DOCUMENT # P99000072732** 1. Entity Name KIRKPLAN KITCHENS OF SARASOTA, INC COUVIUFF Mailing Address Principal Place of Business 1575 CATTLEMEN ROAD 1575 CATTLEMEN ROAD 12 SARASOTA, FL 34232 SARASOTA, FL 34232 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) Chg-P 08202004 Applied For City & State City & State 4. FEI Number 65-0946325 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LEWIS, KURT F Street Address (P.O. Box Number is Not Acceptable) 6624 GATEWAY AVE. SARASOTA, FL 34231 Zip Code City FL 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 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be П Trust Fund Contribution. Added to Fees Due by September 8, 2004 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition JACKSON BRIDA 1201 TRIE BAY LONE SALASON 1234242 JACKSON, BRIAN NAME NAME STREET ADDRESS 5691 BENT OAK DRIVE STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34232 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME SAZZLE JAN NAME 980 EAST GONDOLA DRIVE STREET ADDRESS STREET ADDRESS VENICE EL 34203 CITY-ST-ZIP CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 oath; that I am an officer or director of the corporation of the receiver or fustee 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 officer like empowered.

ATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Kirkplan Kitchens 54070083
8/24/04

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THIS LETTER IS TO CONFIRM TOOT WE DID

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FOR KIRKPLAN HOCOINGS INC.

PAND KIRKPLAN KITCHENS OF SORAHOTA, INC.

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B. SACKSON.

PRESIDENT.

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****IMPORTANT NOTICE****

You are eligible for a waiver of the \$400 late fee if you did not receive notice of this annual report being due by May 1, pursuant to 607.193(1)(b), Florida Statutes.

A letter stating this fact must accompany the annual report when it is submitted for filing.

EN(4084)