2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S65125

Entity Name: KALLINS CORP.

FILED Jan 11, 2006 Secretary of State

Current Pr	incipal Place	of Business:	New Princ	ipal Place of	Busines	s:
10400 NW HIALEAH G	131ST ST GARDENS, FL	33016	10400 NW HIALEAH G	131ST ST SARDENS, FL	33018	
Current Ma	ailing Address	s:	New Mailii	ng Address:		
10400 NW HIALEAH G	131ST ST GARDENS, FL	33016	10400 NW HIALEAH G	131ST ST BARDENS, FL	33018	
FEI Number:	65-0272856	FEI Number Applied For () FEI Nu	ımber Not Appli	icable ()	Certifica	te of Status Desired (X)
Name and	Address of C	ırrent Registered Agent:	Name and	Address of N	ew Reg	istered Agent:
10400 N.W	RIS, CHRISTOS . 131ST STREI GARDENS, FL	ΞT	10400 N.W	RIS, CHRISTO . 131ST STRE BARDENS, FL	ET	US
The above in the State		ubmits this statement for the purpose	of changing it	s registered of	ffice or re	egistered agent, or both,
SIGNATUR	E:				0	1/11/2006
	Electroni	c Signature of Registered Agent				Date
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS	AND DIRECT	ORS:	ADDITION	S/CHANGES	TO OFF	ICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () KALLINTERIS, C 10400 NW 131S HIALEAH GARDE	T ST	Title: Name: Address: City-St-Zip:	D (X) KALLINTERIS, 0 10400 NW 1315 HIALEAH GARD	CHRISTO, ST ST	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	O () KALLINTERIS, H 10400 NW 131 HIALEAH GARD	HELEN, STREET	X) Addition 33018 US
Title: Name: Address: City-St-Zip:	()!	Delete	Title: Name: Address: City-St-Zip:	O () KALLINTERIS, I 10440 NW 133 HIALEAH GARD	PANAYIO, STREET	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	O () KALLINTERIS, N 10400 NW 131 HIALEAH GARD	VIKOLET, STREET	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	O () KALLINTERIS, 0 10400 NW 131 HIALEAH GARD	CHARALA, STREET	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

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