2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 02, 2006 08:00 AM
Secretary of State

DOCUMENT # S93854

1. Entity Name
K & P HOLDINGS INC.

Principal Place of Business	Mailing Address
2891 NW 22ND TER POMPANO BEACH, FL 33069 US	1 LAS OLAS CIR #302 FORT LAUDERDALE, FL 33316 : US

DO NOT WRITE IN THIS SPACE

01272006   No Chg-P   CR2E034 (11/05)

4. FEI Number
65-0303807

Applied For
Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NIZENSKI, PAUL
1 LAS OLAS CIRCLE, #302
FT LAUDERDALE, FL 33316

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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 title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	NIZENSKI, PAUL
STREET ADDRESS	1 LAS OLAS CIRCLE #302
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316

U00000415975
02/11/06--80107-004 150.00

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12. I hereby certify that the information supplied with this filing 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 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: _____   1-27-06   (954)214-3977

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #