

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 31, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # V05971**

1. Entity Name  
**OLD KRESS BUILDING COMPANY, INC.**



Principal Place of Business - Mailing Address  
**500 DUVAL ST. 424-A FLEMING ST**  
**KEY WEST, FL 33040 KEY WEST, FL 33040 US**



03242006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **65-0391415** Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**FALCONE, ANTHONY V.**  
**424-A FLEMING**  
**KEY WEST, FL 33040**

**DO NOT WRITE 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 \_\_\_\_\_ (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	P
NAME	FALCONE, ANTHONY V.
STREET ADDRESS	500 DUVAL ST.
CITY-ST-ZIP	KEY WEST, FL
TITLE	V
NAME	BOUCHER, KEVIN
STREET ADDRESS	500 DUVAL STREET
CITY-ST-ZIP	KEY WEST, FL
TITLE	S
NAME	SMITH, DONNA K.
STREET ADDRESS	424-A FLEMING STREET
CITY-ST-ZIP	KEY WEST, FL
TITLE	D
NAME	BUFFETT, JIMMY
STREET ADDRESS	424-A FLEMING STREET
CITY-ST-ZIP	KEY WEST, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/13/06-80050-007 150.00

**DO NOT WRITE IN THIS SPACE**

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: Kevin Boucher DATE: 3/24/06 (305) 286-9089