2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V39862

Entity Name: KOSTKA ENTERPRISES, INC.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3574 US 1 SOUTH #113 SAINT AUGUSTINE, FL 32086

Current Mailing Address: New Mailing Address:

3574 US 1 SOUTH #113 SAINT AUGUSTINE, FL 32086

FEI Number: 59-3130278 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOSTKA, GREG KOSTKA, GREG

4475 US 1 SOUTH #506 3574 US 1 SOUTH #113

SAINT AUGUSTINE, FL 32086 US SAINT AUGUSTINE, FL 32086 US

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.

SIGNATURE: GREG KOSTKA 04/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P () Delete Title: D/P (X) Change () Addition

 Name:
 KOSTKA, GREG,
 Name:
 KOSTKA, GREG,

 Address:
 4475 US 1 SOUTH, #506
 Address:
 3574 US 1 SOUTH, #113

 City-St-Zip:
 SAINT AUGUSTINE, FL 32086
 City-St-Zip:
 SAINT AUGUSTINE, FL 32086

Title: VP () Delete Title: VP (X) Change () Addition

Name: AMER. KARL Name: AMER. KARL

Address: 4475 US 1 SOUTH, #506 Address: 3574 US 1 SOUTH, #113

City-St-Zip: SAINT AUGUSTINE, FL 32086 City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 GARRIDO, KENNY
 Name:
 GARRIDO, KENNY

 Address:
 4475 US 1 SOUTH, #506
 Address:
 3574 US 1 SOUTH, #113

 City-St-Zip:
 SAINT AUGUSTINE, FL 32086
 City-St-Zip:
 SAINT AUGUSTINE, FL 32086

Title: S/T () Delete Title: S/T (X) Change () Addition

 Name:
 VAUGHN, STACY
 Name:
 VAUGHN, STACY

 Address:
 4475 US 1 SOUTH, #506
 Address:
 3574 US 1 SOUTH, #113

 City-St-Zip:
 SAINT AUGUSTINE, FL 32086
 City-St-Zip:
 SAINT AUGUSTINE, FL 32086

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.

SIGNATURE: STACY VAUGHN S/T 04/26/2007