


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000092319

1. Entity Name
K3T, INC.



Principal Place of Business
**379 GLENBROOK DRIVE
 ATLANTIS, FL 33462**

Mailing Address
**379 GLENBROOK DRIVE
 ATLANTIS, FL 33462**



04242006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
51-0422846 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
 1840 SW 22ND ST.
 4TH FLOOR
 MIAMI, FL 33145**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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	BOHANNON, KENNETH
STREET ADDRESS	379 GLENBROOK DRIVE
CITY-ST-ZIP	ATLANTIS, FL 33462
TITLE	V
NAME	BOHANNON, KYLE
STREET ADDRESS	379 GLENBROOK DRIVE
CITY-ST-ZIP	ATLANTIS, FL 33462
TITLE	SO
NAME	PASTMAN, NADEEN
STREET ADDRESS	379 GLENBROOK DRIVE
CITY-ST-ZIP	ATLANTIS, FL 33462
TITLE	T
NAME	BOHANNON, TARA
STREET ADDRESS	379 GLENBROOK DRIVE
CITY-ST-ZIP	ATLANTIS, FL 33462
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 05/12/06-80030-002 150.00

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: Nadeen Pastman **NADEEN PASTMAN** - 4-15-06 561-704-892
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

BOHANNON