

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000063302

FILED
Apr 19, 2004
Secretary of State

Entity Name: ASCENT K2 INCORPORATED

Current Principal Place of Business:

1305 COSTA MESA DR
WESLEY CHAPEL, FL 33543

New Principal Place of Business:

Current Mailing Address:

1305 COSTA MESA DR
WESLEY CHAPEL, FL 33543

New Mailing Address:

FEI Number: 06-1700415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RATNASEKERA, YASODHA
1305 COSTA MESA DR
WESLEY CHAPEL, FL 33543

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CHONG, DAVID
Address: 5688 W CRENSHEW ST #200
City-St-Zip: TAMPA, FL 33634

Title: DV () Delete
Name: RATNASEKERA, YASODHA
Address: 1305 COSTA MESA DR
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: DV () Delete
Name: SKOWRONSKI, KRIS
Address: 1400 GANDY BLVD N APT 1515
City-St-Zip: ST PETERSBURG, FL 33702

Title: DV () Delete
Name: SKOWRONSKI, SCOTT
Address: 1128 KENNEWICK CT
City-St-Zip: WESLEY CHAPEL, FL 33543

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: YASODHA RATNASEKERA

DV

04/19/2004

Electronic Signature of Signing Officer or Director

_____ Date