

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000049490 (2)**

1. Corporation Name
A&K COIN, INC.



Principal Place of Business
**3727 S. LOCKWOOD RIDGE RD.
SARASOTA FL 34239**

Mailing Address
**3727 S. LOCKWOOD RIDGE RD.
SARASOTA FL 34239**

21	2. Principal Place of Business	26	2a. Mailing Address
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State	28	City & State
24	Zip	29	Zip
	Country	30	Country

3. Date Incorporated or Qualified	3a. Date of Last Report
06/22/1995	
4. FFL Number	Applied For Not Applicable
65-0650412	
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under S. 199 (032), Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**SIEGFRIED, ALAN
3727 S. LOCKWOOD RIDGE RD.
SARASOTA FL 34239**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0702 and 607.1516, Florida Statutes, the undersigned, a resident of this State, hereby certifies that the above named corporation is a corporation for the purpose of charging its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0705, Florida Statutes.

SIGNATURE:

12. OFFICERS AND DIRECTORS

TITLE	PRES	<input type="checkbox"/> DELETE
NAME	KAREN J. SIEGFRIED	
STREET ADDRESS	3727 S. LOCKWOOD RIDGE	
CITY-STATE-ZIP	SARASOTA FL 34239	
TITLE	SEC	<input type="checkbox"/> DELETE
NAME	ALAN H. SIEGFRIED	
STREET ADDRESS	3727 S. LOCKWOOD RIDGE	
CITY-STATE-ZIP	SARASOTA FL 34239	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

800001771808 Change Addition

-04/08/96--01022--023

*****200.00**

Change Addition

Change Addition

Change Addition

14. I do hereby certify that the information supplied with this filing is voluntary, true, correct and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made and dated that I am an officer or director of the corporation or the registered office or registered agent of the corporation. I have read this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed. I am an agent with an address.

SIGNATURE: **SEC**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ALAN H. SIEGFRIED

43-96 941-923-8742

CR2E034 (12/95)

PROV 14-6-96