## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000095373

Entity Name: A.K. WOOD CRAFT INC.

4045 ARTHURIUM AVE.

LANTANA, FL 33462

Address:

City-St-Zip:

FILED Feb 09, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3821 FISC WEST PA	CAL CT. LM BEACH, FL 3	3404			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	CAL COURT BEACH, FL 33404	4 US			
FEI Number	: 65-0303393	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	l Address of Cur	rent Registered Agent:	Name and Address of	of New Registered Agent:	
3821 FISC	ANTONIOS :AL CT. BEACH, FL 33404	1 US			
	e named entity sub e of Florida.	omits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI					
		Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing Ti	rust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () De LOUKAS, ANTONK 1727 KELSO AVE LAKE WORTH, FL	os	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () De LOUKAS, MICHAE 1727 KELSO AVE LAKE WORTH, FL	L	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CEO () De MELTINI, LOUKAS 1727 KELSO AVE LAKE WORTH, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	T ()De		Title:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: CHRISTOS LOUKAS T 02/09/2005