


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 21, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000002813**

1. Entity Name  
**A K PROFESSIONAL RESOURCES, INC.**



Principal Place of Business 12472 LAKE UNDERHILL RD, SUITE 145 ORLANDO, FL 32828	Mailing Address 12472 LAKE UNDERHILL RD, SUITE 145 ORLANDO, FL 32828
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**DO NOT WRITE IN THIS SPACE**



04112004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-3554088</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**ARONBERG, STANLEY M**  
12472 LAKE UNDERHILL RD, SUITE 145  
ORLANDO, FL 32828

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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, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

00000123608  
04/22/04-80011-018 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARONBERG, STANLEY M 12472 LAKE UNDERHILL RD, SUITE 145 ORLANDO, FL 32828
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRAVITZ, LEONARD R 12472 LAKE UNDERHILL RD STET 145 ORLANDO, FL 32828
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12. I hereby certify that the information supplied with this filing does not qualify 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 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:** L. R. Kravitz **4/14/04** **407-673-4056**  
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR Date Daytime Phone #