

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # 852232

1. Entity Name
GK TECHNOLOGIES, INCORPORATED



Principal Place of Business
4 TESSENEER DR
HIGHLAND HEIGHTS, KY 41076 US

Mailing Address
4 TESSENEER DR
HIGHLAND HEIGHTS, KY 41076 US

DO NOT WRITE IN THIS SPACE



01182005 No Chg-P CR2E034 (10/03)

4. FEI Number
13-3064555

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PCEO
NAME	KENNY, GREGORY
STREET ADDRESS	7756 TECUMSEH TR.
CITY- ST- ZIP	CINCINNATI, OH 45243
TITLE	EDTA
NAME	VIRGULAK, CHRISTOPHER F
STREET ADDRESS	8124 STARTING GATE LN
CITY- ST- ZIP	CINCINNATI, OH
TITLE	VPDS
NAME	SIVERD, ROBERT J.
STREET ADDRESS	6700 ALBERLY RD.
CITY- ST- ZIP	CINCINNATI, OH 45243
TITLE	AS
NAME	WHELAN, JEFFREY J
STREET ADDRESS	9006 PATRICKS GLEN
CITY- ST- ZIP	CINCINNATI, OH 45242
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

000000303048
14/13/05-80035-023 150.00

DO NOT WRITE
IN THIS SPACE

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.1.05

Date

559-572-8000

Daytime Phone #