

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90020 014 ***150.00

DOCUMENT # G09368

1. Entity Name
K & A CHARTERS INCORPORATED



Principal Place of Business

**13385 WEST DIXIE HWY
MIAMI, FL 33161 US**

Mailing Address

**13385 W. DIXIE HIGHWAY
NORTH MIAMI, FL 33161 US**



03132006 No Chg-P CR2E034 (11/05)

4. FEI Number

59-2238541

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ALBERT, RON
13385 W. DIXIE HIGHWAY
N. MIAMI, FL 33161**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME ALBERT, HOWARD
STREET ADDRESS 10626 NE 11TH AVENUE
CITY - ST - ZIP MIAMI SHORES, FL

TITLE V
NAME ALBERT, RON
STREET ADDRESS 13385 W. DIXIE HWY.
CITY - ST - ZIP NORTH MIAMI, FL

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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: X Howard Albert, Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date X 3/17/06 Daytime Phone # _____