

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G26678

Entity Name: A & K INVESTMENTS CO.

FILED  
Apr 30, 2008  
Secretary of State

## Current Principal Place of Business:

4137 W VINE STREET  
KISSIMMEE, FL 34741 US

## Current Mailing Address:

4137 W. VINE STREET  
KISSIMMEE, FL 34741 US

## New Principal Place of Business:

4139 W VINE STREET  
SUITE 117  
KISSIMMEE, FL 34741 US

## New Mailing Address:

4139 W. VINE STREET  
SUITE 117  
KISSIMMEE, FL 34741 US

FEI Number: 59-2286471

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHADEESINGH, KAMAL  
4137 W VINE STREET  
KISSIMMEE, FL 34741 US

## Name and Address of New Registered Agent:

CHADEESINGH, KAMAL  
4139 W VINE STREET  
SUITE 117  
KISSIMMEE, FL 34741 US

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.

SIGNATURE:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: CHADEESINGH, KAMAL,  
Address: 4137 W VINE ST  
City-St-Zip: KISSIMMEE, FL

Title: VT ( ) Delete  
Name: CHADEESINGH, ALICE,  
Address: 4137 W. VINE ST  
City-St-Zip: KISSIMMEE, FL

Title: S ( ) Delete  
Name: ALICE, CHADEESINGH  
Address: 4137 W VINE ST  
City-St-Zip: KISSIMMEE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CHADEESINGH, KAMAL,  
Address: 4139 W VINE ST, SUITE 117  
City-St-Zip: KISSIMMEE, FL 34741 US

Title: VT (X) Change ( ) Addition  
Name: CHADEESINGH, ALICE,  
Address: 4139 W. VINE ST., SUITE 117  
City-St-Zip: KISSIMMEE, FL 34741 US

Title: S (X) Change ( ) Addition  
Name: ALICE, CHADEESINGH  
Address: 4139 W VINE ST., SUITE 117  
City-St-Zip: KISSIMMEE, FL 34741 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: KAMAL CHADEESINGH

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date