


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 19, 2008 8:00 am**  
**Secretary of State**

02-19-2008 90016 034 \*\*\*150.00

<b>DOCUMENT # H81306</b> 1. Entity Name <b>BUNKIE, INC.</b>					
Principal Place of Business <b>% WILLIAM C. LANK JR.</b> <b>2733 NORHTEAST 37TH DRIVE</b> <b>FORT LAUDERDALE, FL 33308</b>			Mailing Address <b>% WILLIAM C. LANK JR.</b> <b>2733 NORHTEAST 37TH DRIVE</b> <b>FORT LAUDERDALE, FL 33308</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-2619963</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
-6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>LANK, WILLIAM C. JR.</b> <b>2733 NORTHEAST 37TH DRIVE</b> <b>FORT LAUDERDALE, FL 33308</b>				Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;"><b>FL</b></span> Zip Code	
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 _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>LANK, WILLIAM C. JR.</b> <b>2733 NE 37TH DR</b> <b>FT LAUDERDALE, FL</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>C</b> <b>LANK, MARY G</b> <b>4142 NE 25TH AVE</b> <b>FT LAUDERDALE, FL</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>LANK, EILEEN M</b> <b>2733 NE 37TH DR</b> <b>FT. LAUDERDALE, FL</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MICHEL, PATRCIA M</b> <b>2129 NE 67TH ST</b> <b>FT LAUDERDALE, FL</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD</b> <b>LINNE, MARY E.</b> <b>2079 NE 54TH COURT</b> <b>FT LAUDERDALE, FL</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>LINNE, TERRANCE</b> <b>2079 NE 54TH CT</b> <b>FT LAUDERDALE, FL</b>	<input type="checkbox"/> Delete			
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: <i>William C. Lank Jr.</i> <b>William C. LANK Jr. President</b> <b>3/14/08</b> <b>954-978-6600</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <span style="float: right;">Date Daytime Phone #</span>		