2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H85826

City-St-Zip:

Entity Name: TAK ASSOCIATES, INC.

FILED Aug 04, 2008 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | | | |
|---|-------------------------------------|---|------------------|---|-------------------------------|-------------|------------------|---------------|
| 1100 S FEDERAL HWY #4 BOYNTON BCH., FL 33435 | | | | 917 10TH STREET LAKE PARK., FL 33403 | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | | |
| 1100 S FEDERAL HWY #4 BOYNTON BCH., FL 33435 | | | | 917 10TH STREET LAKE PARK., FL 33403 | | | | |
| FEI Number: | : 59-2718958 | FEI Number Applied For() | FEI Nur | mber Not Appl | icable () | Certific | ate of Status De | sired () |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | | | |
| 4761 HOLI | IONG, YOEN I LY DR ACH GARDEN | | | | | | | |
| | named entity e of Florida. | submits this statement for t | the purpose o | of changing i | ts registered | d office or | registered age | ∍nt, or both, |
| SIGNATUR | RE: | | | | | | | |
| | Electro | nic Signature of Registered | Agent | Date | | | | |
| | | 93(2)(b), F.S., the corporation d ng Trust Fund Contribution (). | id not receive t | the prior notic | e. | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | | | |
| Title: Name: Address: City-St-Zip: | TJIN-A-KHONO 4761 HOLLY [|) Delete 5, YOEN L, AM DR GARDENS, FL 33418 | | Title: Name: Address: City-St-Zip: | | () Change | () Addition | |
| Title: Name: Address: City-St-Zip: | TJIN-A-KHONO 4761 HOLLY [|) Delete G, CHEN E, LINE DR GARDENS, FL 33418 | | Title: Name: Address: City-St-Zip: | | ()Change | () Addition | |
| Title: Name: Address: | (|) Delete | | Title: Name: Address: | T HIMMEL, BR 2407 QUANT | ADLEY | (X) Addition | |

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.

City-St-Zip:

BOYNTON BEACH, FL 33426

SIGNATURE: BRADLEY HIMMEL T 08/04/2008