## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jan 09, 2008 08:00 Al Secretary of State DOCUMENT # J22161 1. Entity Name AKOT INTERNATIONAL, INC. Principal Place of Business Mailing Address 235 HUNT CLUB BLVD 235 HUNT CLUB BLVD STE 201 STE 201 LONGWOOD, FL 32779 LONGWOOD, FL 32779 01042008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2700946 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent The of sold the way of the history IANDOLI, RAYMOND DO NOT WRITE 104 GOLFCLUB DRIVE LONGWOOD, FL 32779 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE IANDOLI, RAYMOND NAME 104 GOLFCLUB DRIVE STREET ADDRESS CITY-ST-ZIP LONGWOOD, FL TITLE IANDOLI, CLAIRE NAME STREET ADDRESS 6285 TALL CYPRESS CIR. CITY-ST-ZIP LAKE WORTH, FL STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS at the office of the for the Contracting some spaces with CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NTED NAME OF SIGNING OFFICER OR DIRECTOR