

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

APPROVED AND FILED

MAY - 1 1994 10:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995  
SECRETARY OF STATE  
DEPARTMENT OF STATE  
TAMPA, FLORIDA  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # **K22174** (2)  
1. Corporation Name  
**AOK ENTERPRISES, INC.**

2. Director Name and Address: **19720 BOB O LINK DR MIAMI FL 33015**  
3. Director Name and Address: **19720 BOB O LINK DR MIAMI FL 33015**  
4. Director Name and Address: **19720 BOB O LINK DR MIAMI FL 33015**  
5. Director Name and Address: **19720 BOB O LINK DR MIAMI FL 33015**

3. Date Reported for Filing: **04/29/1988**  
3a. Date of Filing: **05/01/1994**  
4. FEI Number: **65-0052868**  
Applied Fee: [ ]  
Not Applied Fee: [ ]  
5. Contribution of Related Interest: **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Total Excess Contribution: **\$5.00 May Be Added to Fees**  
7. Have you prepared this report for a corporation that is a subsidiary of another corporation?  Yes  No  
8. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent  
**ANNUNZIATO, ANGELO A  
19720 BOB-O-LINK DR  
MIAMI 33015**

81. Name  
82. Street Address: **19720 Bob-O-Link Dr., Miami, FL**  
83. City  
84. State: **FL**  
85. Zip

11. This report is the property of the Secretary of State and is loaned to you for your use only. It is not to be distributed to the public. If you have any questions, please call the Secretary of State at (904) 487-1400. This report is to be filed with the Secretary of State and will be available to the public.

12. NAME	<b>P</b>	ANNUNZIATO, RUTH M. 19720 BOB-O-LINK DR MIAMI FL	13. ADDRESS	<b>P</b>	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME	<b>S-T</b>	ANNUNZIATO, ANGELO A. 19720 BOB-O-LINK DR MIAMI FL	ADDRESS	<b>S-T</b>	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NAME			ADDRESS		<input type="checkbox"/>	YES	<input type="checkbox"/>	NO

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SIGNATURE: **Angelo A. Annunziato**  
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR, OFFICER OR EMPLOYEE  
**ANGELO A. ANNUNZIATO**

SECRETARY/TREASURER  
**4 2595**  
**305-829-9628**