

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K66449

1. Entity Name
SK GARAGE CORP.



FILED
Jul 11, 2008 08:00 AM
Secretary of State

Principal Place of Business
% ANUKUL SANGSUPAN
5610 W WATERS AVE
TAMPA, FL 33634

Mailing Address
% ANUKUL SANGSUPAN
5610 W WATERS AVE
TAMPA, FL 33634



01302008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2930782	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SANGSUPAN, ANUKUL
5610 W WATERS AVE
TAMPA, FL 33634

**DO NOT WRITE
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)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U000000954429
07/11/08-80012-025 550.00

10. OFFICERS AND DIRECTORS

TITLE	DPST
NAME	SANGSUPAN, ANUKUL
STREET ADDRESS	2710 MIDTIMES AVE
CITY-ST-ZIP	TAMPA, FL

TITLE	D
NAME	SANGSUPAN, GUNYAR
STREET ADDRESS	2710 MIDTIMES AVE
CITY-ST-ZIP	TAMPA, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anukul Sangsupan

9/08/08

(813) 885-9986

Date

Daytime Phone #