## 2008 FOR PROFIT CORPORATION

SIGNATURE:

## FILED **ANNUAL REPORT** Mar 28, 2008 08:00 Al **DOCUMENT # K95679 Secretary of State** 1. Entity Name K. ALBERTS, P.A. Principal Place of Business Mailing Address 9822 N.W. 18 STREET 9822 N.W. 18 STREET CORAL SPRINGS, FL 33071 US CORAL SPRINGS, FL 33071 No Chg-P 03212008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0133237 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALBERTS, KATHLEEN DO NOT WRITE 9822 N.W. 18 STREET CORAL SPRINGS, FL 33071 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 Fiorlda. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE 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. Added to Fees OFFICERS AND DIRECTORS 10. TITLE U00000873659 04/10/08-80083-008 150.00 ALBERTS, K. NAME STREET ADDRESS 9822 N.W. 18 STREET CITY-ST-ZIP CORAL SPRINGS, FL 33071 TITLE D NAME ALBERTS, MARVIN STREET ADDRESS 9822 N.W. 18 STREET CITY-ST-7/P CORAL SPRINGS, FL 33071 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Fiorida 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 eppowered 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR