

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 18, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000005703 1. Entity Name A.O.K. PROMOTIONS LLC	
---	---

Principal Place of Business 1328 N. FERDON #284 CRESTVIEW, FL 32536	Mailing Address 1328 N. FERDON #284 CRESTVIEW, FL 32536
---	---

DO NOT WRITE IN THIS SPACE



07152005 No Chg-LLC CR2E083 (10/03)

4. FCI Number 42-1606894	Accepted For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BROWN, ALEX MORENO 1328 N. FERDON #284 CRESTVIEW, FL 32536	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 _____

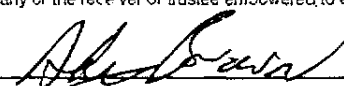
Filing Fee is \$50.00
Due by September 7, 2005

1000000373244
07/18/05-80006-019 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY ST ZIP	MGRM BROWN, ALEX 1328 N. FERDON #284 CRESTVIEW, FL 32536
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE