

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000050430

FILED
Jul 07, 2008
Secretary of State

Entity Name: AK ENTERTAINMENT GROUP, LLC

Current Principal Place of Business:

1256 SOUTHWEST CEDAR COVE
PORT SAINT LUCIE, FL 34986

New Principal Place of Business:

2096 NW COURTYARD CIRCLE
PORT SAINT LUCIE, FL 34986

Current Mailing Address:

1256 SOUTHWEST CEDAR COVE
PORT SAINT LUCIE, FL 34986

New Mailing Address:

2096 NW COURTYARD CIRCLE
PORT SAINT LUCIE, FL 34986

FEI Number: 26-0168624 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET
4TH FLOOR
MIAMI, FL 33145 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PATEL, KRUNAL
Address: 1256 SOUTHWEST CEDAR COVE
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: MGR () Delete
Name: PATEL, ANUJ
Address: 1256 SOUTHWEST CEDAR COVE
City-St-Zip: PORT SAINT LUCIE, FL 34986

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: KRUNAL PATEL

MGR

07/07/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date