



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 08:00 AM
Secretary of State

DOCUMENT # L28854 1. Entity Name K2 ENGINEERING, INC.	
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Principal Place of Business 7804 US HIGHWAY 301 SOUTH RIVERVIEW, FL 33569-4351 US	Mailing Address 7804 US HIGHWAY 301 SOUTH RIVERVIEW, FL 33569-4351 US
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DO NOT WRITE IN THIS SPACE



03042008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2977470	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KOWALSKI, AMY J.
5720 EAGLEMOUNT CIR.
LITHIA, FL 33547

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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 _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVT KOWALSKI, JOSEPH A 5720 EAGLEMOUNT CIR. LITHIA, FL 33547
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S KOWALSKI, AMY J 5720 EAGLEMOUNT LITHIA, FL 33547
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03/26/08-80093-005 158.75

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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: Joseph A. Kowalski Joseph A. Kowalski 3/4/08 813-677-0706

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #