

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000029298**

1. Entity Name

PK ENTERPRISES OF LAKE LAND, INC.



Principal Place of Business

6380 US HWY 98 NORTH  
LAKE LAND, FL 33859

Mailing Address

512 LAKE HARRIS DRIVE  
LAKE LAND, FL 33813



04062008

No Chg-P

CR2E034 (11/05)

4. FEI Number

59-3635622

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

KOO, ROBERT W  
512 LAKE HARRIS DR  
LAKE LAND, FL 33813

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 re-registering)

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

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	KOO, ROBERT
STREET ADDRESS	512 LAKE HARRIS DRIVE
CITY-STATE-ZIP	LAKE LAND, FL 33813
TITLE	D
NAME	PITSIKOULIS, MICHAEL
STREET ADDRESS	4905 HANCOCK LAKE RD
CITY-STATE-ZIP	LAKE LAND, FL 33813
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

U000000893519  
04/23/08-80109-020 150.00

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

Date

Daytime Phone #

4/15/2008 (863) 644-5055