

**FILED**  
**Jan 26, 2007 8:00 am**  
**Secretary of State**

01-26-2007 90029 009 \*\*\*150.00

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

|                                                                         |                                                                                   |
|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT #</b> P00000065756<br><b>1. Entity Name</b><br>SPK FLK, INC |  |
|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------|

**DO NOT WRITE IN THIS SPACE**

**60007218**

|                                                                                                     |                                                                                                     |
|-----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <b>2. Principal Place of Business</b><br>3360 Montara Drive<br>Suite, Apt. #, etc.                  | <b>3. Mailing Address</b><br>SAME<br>Suite, Apt. #, etc.                                            |
| <b>City &amp; State</b><br>Bonita Springs, FL 34134<br><b>Zip</b><br>34134<br><b>Country</b><br>USA | <b>City &amp; State</b><br>Bonita Springs, FL 34134<br><b>Zip</b><br>34134<br><b>Country</b><br>USA |

DO NOT WRITE IN THIS SPACE

|                                                                                                           |                                       |
|-----------------------------------------------------------------------------------------------------------|---------------------------------------|
| <b>4. FEI Number</b><br>65-1023016                                                                        | <b>Agg. Fee For</b><br>Not Applicable |
| <b>5. Certificate of Status Desired</b><br><input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |                                       |

|                                   |                                                                                  |                    |
|-----------------------------------|----------------------------------------------------------------------------------|--------------------|
| <b>DO NOT WRITE IN THIS SPACE</b> | <b>7. Name and Address of Current Registered Agent</b>                           |                    |
|                                   | <b>Name:</b> John Kemon                                                          |                    |
|                                   | <b>Street Address (P.O. Box Number is Not Acceptable):</b><br>3360 Montara Drive |                    |
|                                   | <b>City</b><br>Bonita Springs                                                    | <b>State</b><br>FL |

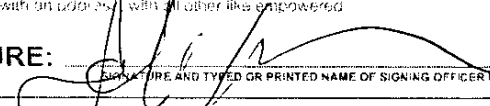
**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent.**

**SIGNATURE**  
\_\_\_\_\_  
Signature must be of current name of registered agent and be filed with the UBR. Registered agent signature required for all filings.

|                                                                                                                                                                              |                                                                                                                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| <b>January 1 - May 1 Fee is \$150.00</b><br><b>After May 1, Fee is \$550.00</b><br><b>Amended UBR is \$61.25</b><br><b>Make Check Payable to Florida Department of State</b> | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|

| <b>10. OFFICERS AND DIRECTORS</b> |             |                       |                          |
|-----------------------------------|-------------|-----------------------|--------------------------|
| <b>TITLE</b>                      | <b>NAME</b> | <b>STREET ADDRESS</b> | <b>CITY-STATE-ZIP</b>    |
|                                   | John Kemon  | 3360 Montara Drive    | Bonita Springs, FL 34134 |
|                                   | John Kemon  | 3360 Montara Drive    | Bonita Springs, FL 34134 |
|                                   |             |                       |                          |
|                                   |             |                       |                          |
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|                                   |             |                       |                          |

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information stated on this report or supplemental report is true and accurate and that my signature shall be a legal attestation made under oath that I am an officer or director of the corporation or the registered trustee empowered to execute this report as required by law, and that my name appears in Block 10 of this report as an attachment with an affidavit with all other like empowered.**

**SIGNATURE:**  **3360 Montara Drive**  
**Bonita Springs, FL 34134**  
Signature and Typed or Printed Name of Signing Officer or Director