

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

7/21

FILED
Aug 14, 2006 8:00 am
Secretary of State

07-25-2006 90022 033 ***550.00

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1. Entity Name
WKL & ASSOCIATES, INC.



Principal Place of Business

4141 NE 2ND AVE
SUITE 101-I
MIAMI, FL 33137

Mailing Address

4141 NE 2ND AVE
SUITE 101-I
MIAMI, FL 33137

DO NOT WRITE IN THIS SPACE



01042008 No Chg-P CR2E034 (11/05)

4. FEI Number
52-2275973

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ROBINSON, WILLIAM C
220 COURTHOUSE PLAZA
28 WEST FLAGLER
MIAMI, FL 33130

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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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 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 ROSCOE, WARREN
STREET ADDRESS 1689 SOUTH GOLDENEYE LANE
CITY-ST-ZIP HOMESTEAD, FL 33035

TITLE D
NAME WILLIAM, CHROSTOPHER
STREET ADDRESS 147 NE 158 STREET
CITY-ST-ZIP MIAMI, FL 33162

TITLE D
NAME ROBINSON, KEVIN M
STREET ADDRESS 311 WASHINGTON AVENUE APT D-4
CITY-ST-ZIP BROOKLAND, NY 11025

TITLE D
NAME ELLSWORTH, LEWIS
STREET ADDRESS 815 NW 1ST AVENUE
CITY-ST-ZIP MIAMI, FL 33136

TITLE P
NAME ROBINSON, WILLIE C
STREET ADDRESS 3900 ESTEPONA AVENUE
CITY-ST-ZIP MIAMI, FL 33178

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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:

Willie C. Robinson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/7/2006
DATE

Daytime Phone #