

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000017249

Entity Name: K & K AMPLIFIED ASSETS, INC.

FILED  
Apr 06, 2009  
Secretary of State

## Current Principal Place of Business:

3100 NORTH OCEAN BLVD.  
#2209  
FT LAUDERDALE, FL 333087116

## New Principal Place of Business:

## Current Mailing Address:

3100 NORTH OCEAN BLVD.  
#2209  
FT LAUDERDALE, FL 333087116

## New Mailing Address:

FEI Number: 65-1091595      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUDOLF & HOFFMAN, P.A.  
615 NORTHEAST THIRD AVENUE  
FT LAUDERDALE, FL 33308      US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: PATEL, KIRIT N  
Address: 3100 NORTH OCEAN BLVD #2209  
City-St-Zip: FT LAUDERDALE, FL 333087116

Title: VPSD ( ) Delete  
Name: PATEL, KALPANA K  
Address: 3100 NORTH OCEAN BLVD #2209  
City-St-Zip: FT LAUDERDALE, FL 333087116

Title: D ( ) Delete  
Name: PATEL, MITESH K  
Address: 902A LARKE ELLEN CIRCLE  
City-St-Zip: LOS ANGELES, CA 90035

Title: D ( ) Delete  
Name: DAMBOISE, AVANI  
Address: 1916 STOTHER AVE.  
City-St-Zip: LOS ANGELES, CA 90025

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIRIT N PATEL

PRES

04/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date