2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000033002

1. Entity Name CFK ADVERTISING, INC.



Principal Place of Business

7491 ULMERTON ROAD

R

LARGO, FL 33771

Mailing Address

7491 ULMERTON ROAD

B LARGO, FL 33771

FILED Jul 06, 2006 8:00 am Secretary of State

07-06-2006 90001 038 ***150.00

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DO NOT WRITE IN THIS SPACE

06302006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3715323

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FLA INC 390 NORTH ORANGE AVENUE SUITE 1100 ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the ions of registered agent.	purpose of changing its registered	d office or	registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and titl	ie if applicable. (NOTE: Registered	Agent signatur	e required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIRE	ECTORS		•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KER, CRAWFORD 214 HARBORVIEW LANE LARGO, FL 33770				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

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:

CITY-ST-ZiP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/30/06 727-451-7