'2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P01000038409					FILED			
1. Entity Name OK PROMOTIONS, INC.						04 SEP	20 AH 8	57
					_	SECRETA	Miller STA	H
Principal Place of Business Mailing Address						TALLAHA	SSEE, FLORI	ĺĎΑ
1900 S OCEAN DRIVE SUITE 5S POMPANO BEACH FL 33062 1900 S OCEAN DRIVE SUITE 5S POMPANO BEACH FL 33062 POMPANO BEACH FL 33062					08/19/	04 90051 d		
2. Principal Place of Business 5434 W. Sample Road 3. Mailing Address 5434 W. Sample				Road				
Suite, Apt. #, etc. 2.7.8		Suite, Apt. #, etc.				MOORE C	R2E034 (4/04)	
City & State Margate, FL		City & State Margate, FL			4. FEI Numb	<sup>er</sup> 65-1103112	<del> </del>	opplied For Not Applicable
Zip 3 3 0 7 3	Country	Zip 33073	Country 3		5. Certificate of Status Desired See Required Fee Required			
6. Name and Address of Current Registered Agent					7. Name and	Address of New Regi	istered Agent	
		\ r	Name					
190	JFMAN, OWEN—— 0 S OCEAN DRIVE SUITE ! MPANO BEACH FL 33062	5S		Street Address (P.O. Box Number is Not Acceptable)				
•	,			City			FL Zip Co	de
8. The above named entity submits this statement for the purpose of changing its register				office or registe	ered agent, or bo	oth, in the State of Florid		n, and accept
the obliga	tions of registered agent.	,	•	-				·
SIGNATURE								<u>.</u>
· · · · · · · · · · · · · · · · · · ·	Signature, typed or printed name of registered age	nt and little if applicable. (NOT	E: Registered Ag	gera signature requir	ed when reinstating)	r	DATE	
New York	ILE NOW!!! FEE IS \$550.00 DUE BY September 8, 2004 k Payable to Florida Department	S.607.193(2)(b), late fee. By checons of State did not receive	cking this bo	ox, the corpora	tion certifies it	Election Campaign     Trust Fund Contrib	<u> </u>	.00 May Be ded to Fees
10.	tions are a consistent and the second section and the second section and	D DIRECTORS	11.	<del></del>	ADDITIONS	L CHANGES TO OFFICE	ERS AND DIRECTO	RS IN 11
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NAME	:	Leiete	NAME				C) cuentit	
STREET ADORESS			-	ADDRESS				
CITY-SI-ZIP	<u> </u>		CITY-ST			NO. 5. 1 - 5 - 1		
12. I hereby indicate of the co change	certify that the information supplied wild on this report or supplemental report or progration or the receiver or trustee end, or on an attachment with an address	vith this filing does not qualify to t is true and accurate and that noowered to execute this repor- s, with all other like empowered	or the exemp my signatur it as required d.	ption stated in re shall have th d by Chapter 6	Section 119.07(3 ne same legal eff 507, Florida Statu	<ul> <li>i)(i), Florida Statutes, I fi ect as if made under oa les; and that my name a</li> </ul>	arther certify that the th; that I am an offic appears in Block 10	information er or director or Block 11 if
l .		villa )	-	سيصم	01.	m 9 c. a	0 000-1	34/2
SIGNA	TURE:	O DELINITED MANUE OF SIGNAMA OFFICE			<u> </u>	7/ sof 95	ch - 10]	7267





ASI# 287127

5434 W. Sample Road, Suite 278 Margate, Florida 33073 e-mail: okokayvk@aol.com (954) 781-3262

September 14<sup>th</sup> 2004
Florida Department of State
Division of Corporations
P.O. Box 5327

Tallahasse, FL 32314

Subject: OK PROMOTIONS INC.

Reference #: P01000038409

I received a letter as a follow-up to the annual/uniform business report. A copy of which I am attaching.

After the death of my wife I had to move to a new location. In all the upset I never did receive the original paper work to file in a timely fashion. When I recently received notification of the oversight I filed with a check for \$150. Now I am told that I owe an additional \$400. late fee. This letter is a respectful request that you consider abating this fee due to the fact that I did not receive the original form.

Thank you.

Owen Kaufman