

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000079572

Entity Name: F.K.E. CORP.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

5209 SUMMERWOOD CT.
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

5209 SUMMERWOOD CT.
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 65-1130216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER AND ASSOCIATES, P.A.
5658 NEW YORK AVENUE
SARASOTA, FL 34231 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: DPST () Delete
Name: SCHILLER, FRANK J
Address: 5209 SUMMERWOOD CT.
City-St-Zip: SARASOTA, FL 34233

Title: V () Delete
Name: SCHILLER, YVONNE
Address: 5209 SUMMERWOOD CT.
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: SCHILLER, FRANK J
Address: 5209 SUMMERWOOD CT.
City-St-Zip: SARASOTA, FL 34233

Title: P (X) Change () Addition
Name: SCHILLER, YVONNE
Address: 5209 SUMMERWOOD CT.
City-St-Zip: SARASOTA, FL 34233

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: YVONNE SCHILLER

P

04/27/2007

Electronic Signature of Signing Officer or Director

Date