2003 FOR PROFIT CORPORATION

Mailing Address

UNIFORM BUSINESS REPORT (UBR) P01000082659 DOCUMENT # 1. Entity Name PKC & ASSOCIATES, INC.

Principal Place of Business



Apr 28, 2003 8:00 am § Secretary of State **FILED**

04-28-2003 91728 002 ***150.00

or. Fl. 33309			705 Marine dr. Hallandale fl 33309										V i 	; 	
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#, etc.		Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES								
e		City	City & State				4. FEI Number 65-1130556 Applied For Not Applied be							_	
	Country Zip			Coun	Country 5.			icate of	Status C	esired)	ì		8.75 A	dditional	
6. Name			7	7. Name	and Ac	idress o	of New F	Regist	ered A	gent					
PANTO, JOSEPH					Name										
705 MARINE DRIVE					Street Address (P.O. Box Number is Not Acc					ceptabl	e)				
ALE FL 330	09														
					City							FL	Zip Co	de	
	•	ent for the purpo	ose of changing its	registere	ed office or	registered	agent, c	or both,	in the St	ate of FI	orida.	I am fa	ımiliar with	, and acc	ept
Signature, typed	or printed name of registered	agent and title if appl	licable. (NOTE	: Registere	d Agent signatur	re required who	en reinstatin	ng)				DATE			}
r May 1, 200	3 Fee will be \$550	0.00			.,		g			_		g 🗆			
OFFICERS AND DIRECTO			RS			ADDITIO	ONS/CH	IANGES	TO OF	FICERS	SAND	DIRECTO	RS IN 11		
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	FL 33309 Place of Busin #, etc. e 6. Name OSEPH NE DRIVE ALE FL 330 named entitions of regist Signature, typed ILE NOW!! r May 1, 200 c Payable to P PANTO, J(1) 705 MARI! HALLAND/	Place of Business #, etc. e Country 6. Name and Address of Cur OSEPH NE DRIVE ALE FL 33009 named entity submits this statem ions of registered agent. Signature, typed or printed name of registered in the statem ions of registered agent. Payable to Florida Department of Payable to Florida D	Place of Business #, etc. Suite Country Zip 6. Name and Address of Current Registere OSEPH NE DRIVE ALE FL 33009 named entity submits this statement for the purplions of registered agent. Signature, typed or printed name of registered agent and title if app in May 1, 2003 Fee will be \$550.00 or Payable to Florida Department of State OFFICERS AND DIRECTO PANTO, JOSEPH 705 MARINE DRIVE HALLANDALE FL 33009	Place of Business Place of Bus	PANTO, JOSEPH 705 MARINE DRIVE HALLANDALE FL 33009 HALLANDALE FL 33009 HALLANDALE FL 33009 HALLANDALE FL 33009 ALE FL 33009	HALLANDALE FL 33309 HALLANDALE FL 33309 Packed Pack	FL 33309 HALLANDALE FL 33309 Place of Business 3. Mailing Address #, etc. Suite, Apt. #, etc. Country Zip Country Zip Country 6. Name and Address of Current Registered Agent Name Street Address (PC ALE FL 33009 City named entity submits this statement for the purpose of changing its registered office or registered ions of registered agent. Signature hyaed or primad name of registered agent and steel displicable. (NOTE: Registered Agent agent agent and steel displicable. (NOTE: Registered Agent agent agent and steel displicable. (NOTE: Registered Agent agentative required with the purpose of changing its registered office or registered ions of registered agent agent and steel displicable. (NOTE: Registered Agent agentative required with the purpose of changing its registered office or registered ions of registered agent agentative required with the purpose of changing its registered office or registered ions of registered agent agent and steel displicable. (NOTE: Registered Agent agentative required with the purpose of changing its registered agent agentative registered agent age	HALLANDALE FL 33009 # setc of Business 3. Mailing Address 4. FETN	# ALL ANDALE FL 33309 HALLANDALE FL 33309 # All Malling Address #, etc. Suite, Apt. #, etc. Country Country Country Country Country Country Country Street Address of Current Registered Agent Name Street Address (P.O. Box Number is City Name and Address of Current Registered Agent City Name OSEPH WE DRIVE ALE FL 333009 City In a control of pregistered agent and see if applicative. (MOTE: Registered office or registered agent, or both, lons of registered agent, or both, lons of registered agent. Signature, hyand or primed name of registered Agent and see if applicative. (MOTE: Registered Agent signature registered agent, or both, lons of registered agent. PANTO, JOSEPH OSEPH OSEPH	FL 33309 HALLANDALE FL 33309 Itace of Business	HALANDALE FL 33009 Face of Business 3. Mailing Address 4. FEI Number CHECK HERE	## ALLANDALE FL 33009 Face of Business 2. Mailing Address ##, otc. Suite, Apt #, etc	FL 33099 HALLANDALE FL 33099 Iface of Business S. Mailing Address Iface of Business Suite, Abt. #, etc. Check HERE IF MAKING Country Zip Country S. Certificate of Status Desired Street Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) City FL Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) City FL Name Street Address (P.O. Box Number is Not Acceptable) City FL Name Street Address of Power Registered Agent, or both, in the State of Florids. I am is lone of registered agent. Suprature, logast or proved here of registered Agent and the if applicable (ROTE, Registered Agent agent and the if applicable) City FL Name Street Address (P.O. Box Number is Not Acceptable) DATE Suprature, logast or proved here of registered Agent, or both, in the State of Florids. I am is lone of registered agent. Suprature, logast or proved here of registered Agent and the if applicable (ROTE, Registered Agent agent and the if applicable) INTERNATIONAL PROVIDED DATE PANTO, JOSEPH Debte ITILE NAME STREET ADDRESS CITY-ST-2P D	Ifface of Business 3. Mailing Address 3. Mailin	FL 3309 HALLANDALE FL 33099 ### doi: Surro, Apt #,

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 Justee 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: