




# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 16, 2004 8:00 am**  
**Secretary of State**

04-16-2004 90094 047 \*\*\*150.00

<b>DOCUMENT # P01000102466</b> 1. Entity Name <b>WKM CORPORATION</b>																													
Principal Place of Business <b>6093 OLD COURT ROAD #241 BOCA RATON, FL 33433</b>			Mailing Address <b>PO BOX 1694 BOCA RATON, FL 33429</b>																										
2. Principal Place of Business <b>2263 NW Boca Raton Blvd</b>		3. Mailing Address 																											
Suite, Apt. #, etc. <b>Suite 103</b>		Suite, Apt. #, etc. 																											
City & State <b>Boca Raton, FL</b>		City & State 																											
Zip <b>33431</b>	Country <b>USA</b>	Zip 	Country 	4. FEI Number <b>65-1145777</b>																									
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable																									
6. Name and Address of Current Registered Agent <b>W. KEITH MASON 6093 OLD COURT ROAD #241 BOCA RATON, FL 33433</b>				7. Name and Address of New Registered Agent Name <b>W. Keith Mason</b> Street Address (P.O. Box Number is Not Acceptable) <b>102 NE 2nd Street #2nd</b> City <b>Boca Raton</b> <b>FL</b> Zip Code <b>33432</b>																									
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE <b>4-12-04</b> <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE)</small>																													
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">P W. KEITH MASON</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">6093 OLD COURT ROAD #241</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">BOCA RATON, FL 33433</td> </tr> </table>			TITLE	P W. KEITH MASON	<input type="checkbox"/> Delete	NAME			STREET ADDRESS	6093 OLD COURT ROAD #241		CITY-ST-ZIP	BOCA RATON, FL 33433		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">P W. Keith Mason</td> <td style="width:20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">102 NE 2nd St. #2nd</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">Boca Raton, FL 33432</td> </tr> </table>			TITLE	P W. Keith Mason	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS	102 NE 2nd St. #2nd		CITY-ST-ZIP	Boca Raton, FL 33432	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 				Date <b>4-12-04</b> Daytime Phone # <b>561-347-1916</b>																									
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																													