

# 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P02000001619

1. Entity Name  
TOTAL KNOCK OUT, INC.



FILED

05 MAY 25 PM 12:20

SECRET  
TALLAHASSEE, FLORIDA



05102005 Chg-P CR2E034 (10/03)

Principal Place of Business  
255 NE 2 AVE  
# 237  
DELRAY BEACH, FL 33444

Mailing Address  
255 NE 2 AVE  
# 237  
DELRAY BEACH, FL 33444

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
Zip Country

City & State  
Zip Country

4. FEI Number  
51-0444754

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

STEPHNEY  
STEPHANIE, JANICE  
501 GREENSWARD LANE  
103-C  
DELRAY BEACH, FL 33444-5

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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 JANICE STEPHNEY : Janice Stephney 5/10/05  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
P	HOWIE, SUSIE	6516 NW 54 CT.	LAUDERHILL, FL 33319	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	Janice Stephney	501 GREENSWARD LN C. 103	DELRAY BEACH, FLA 33445	<input checked="" type="checkbox"/>
V. P	Howie Susie	6516 N.W. 54 CT.	LAUDERHILL, FL 33319	<input checked="" type="checkbox"/>
	SECRETARY			<input type="checkbox"/>
	RIC LIVINGSTON	255 NE 2nd AVE #237	DELRAY BEACH, FL 33444	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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: Janice Stephney : Janice Stephney 5/10/05 561 490 4112  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #