

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003890

Entity Name: AKEL, INC.

FILED
Apr 23, 2006
Secretary of State

Current Principal Place of Business:

7818B N. ARMENIA AVE.
TAMPA, FL 33604

New Principal Place of Business:

2828 W KIRBY ST
TAMPA, FL 33614 US

Current Mailing Address:

7818B N. ARMENIA AVE
TAMPA, FL 33604

New Mailing Address:

2828 W KIRBY ST
TAMPA, FL 33614 US

FEI Number: 94-3414917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GEER, ALAN K CPA
7401 D TEMPLE TERRACE HWY.
TAMPA, FL 33637 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: PD () Delete
Name: MELENDI, KELLY
Address: 225 NORTH ST.
City-St-Zip: TAMPA, FL 33604

Title: VD () Delete
Name: PEREZ, KATHIE
Address: 2831 N MORGAN ST
City-St-Zip: TAMPA, FL 33602

Title: SEC () Delete
Name: FERNANDEZ, BRENDA
Address: 6925 N. FLORIDA AVE.
City-St-Zip: TAMPA,, FL 33614 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MELENDI, KELLY
Address: 225 NORTH ST.
City-St-Zip: TAMPA, FL 33604 US

Title: SD (X) Change () Addition
Name: PEREZ, KATHIE
Address: 2831 N MORGAN ST
City-St-Zip: TAMPA, FL 33602 US

Title: VD (X) Change () Addition
Name: PEREZ, MELISSA
Address: 2831 N MORGAN ST
City-St-Zip: TAMPA,, FL 33602 US

I hereby certify that the information supplied with this filing does not qualify for the 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: KELLY MELENDI

PD

04/23/2006

Electronic Signature of Signing Officer or Director

Date