

FILED
May 22, 2003 8:00 am
Secretary of State

05-22-2003 90141 020 ***150.00

**FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000004851
 1. Entity Name
AOK CONSTRUCTION, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
805 Bianca Dr NE
 Suite, Apt. #, etc.

3. Mailing Address
805 Bianca Dr NE
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Palm Bay, FL

City & State
Palm Bay, FL

4. FEI Number **04-3589945** Applied For
 Not Applicable

Zip **32905** Country **USA** Zip **32905** Country **USA**

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

**DO NOT WRITE
 IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **Jack Keeney**

Street Address (P.O. Box Number is Not Acceptable)
805 Bianca Dr NE

City **Palm Bay** State **FL** Zip Code **32905**

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.

SIGNATURE *Jack Keeney* **Jack Keeney**, Registered Agent DATE **5/19/03**

Signature typed or printed name of registered agent if applicable. (NOTE: Registered Agent signature required when reappointing)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

January 1 - May 1 Fee is \$150.00
 After May 1, Fee is \$550.00
 Amended UBR is \$41.25
 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/P/S Allen, Wayne 805 Bianca Dr NE, Palm Bay, FL 32905	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/P/T Keeney, Jack 805 Bianca Dr NE, Palm Bay, FL 32905	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jack B. Keeney* **Jack Keeney** vice President DATE **5/19/03** 321-480-7024

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)