

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000053826

Entity Name: AOKE INCORPORATED

FILED
Jan 05, 2004
Secretary of State

Current Principal Place of Business:

1387 N KILLIAN DR
LAKE PARK, FL 334031943

New Principal Place of Business:

Current Mailing Address:

1387 N KILLIAN DR
LAKE PARK, FL 334031943

New Mailing Address:

FEI Number: 03-0452613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARNONE, RICHARD
1387 NORTH KILLIAN DRIVE
WEST PALM BEACH, FL 33403 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: D () Delete
Name: O'DWYER, WILLIAM
Address: 1387 N KILLIAN DR
City-St-Zip: LAKE PARK, FL 334031943

Title: D () Delete
Name: KAYLOR, RONALD
Address: 1387 N KILLIAN DR
City-St-Zip: LAKE PARK, FL 334031943

Title: D () Delete
Name: ARNONE, RICHARD
Address: 1387 N KILLIAN DR
City-St-Zip: LAKE PARK, FL 334031943

Title: D () Delete
Name: EVANS, MICHAEL
Address: 1387 N KILLIAN DR
City-St-Zip: LAKE PARK, FL 334031943

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RICHARD ARNONE

D

01/05/2004

Electronic Signature of Signing Officer or Director

_____ Date