2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000102260

Entity Name: AKA ENTERPRISES, INC

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10089 US 19

505

NEW PORT RICHEY, FL 34655 PORT RICHEY, FL 34668

New Mailing Address: Current Mailing Address:

10089 US 19 8217 GOLDEN BEAR LP

PORT RICHEY, FL 34668 PORT RICHEY, FL 34668

FEI Number: 22-3887009 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ABU KISHK, AHMAD ABU KISHK, AHMAD S MR 8217 GOLDEN BEAR LP 8217 GOLDEN BEAR LP US PORT RICHEY, FL 34668 US PORT RICHEY, FL 34668

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: AHMAD ABUKISHK 03/25/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

PORT RICHEY, FL 34668

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PORT RICHEY, FL 34668

Title: () Delete Title: (X) Change () Addition ABU KISHK, AHMAD S MR ABU KISHK, AHMAD S MR Name: Name: 10089 US 19 N. #505 8217 GOLDEN BEAR LP Address: Address: City-St-Zip: PORT RICHEY, FL 34668 City-St-Zip: PORT RICHEY, FL 34668

VΡ Title: VΡ (X) Change () Addition Title: () Delete ABU KISHK, KIMBERLY E MRS Name: ABU KISHK, KIMBERLY E MRS Name: 10089 US 19 N #505 8217 GOLDEN BEAR LP Address: Address: PORT RICHEY, FL 34668 PORT RICHEY, FL 34668 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition ABU KISHK, AHMAD S MR ABU KISHK, AHMAD S MR Name: Name: 10089 US 19 N. #505 8217 GOLDEN BEAR LP Address: Address:

Title: () Delete Title: () Change () Addition

ABUKISHK, ANDREW S MR Name: Name: Address: 8217 GOLDEN BEAR LOOP Address: City-St-Zip: PORT RICHEY, FL 34668 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

Ρ SIGNATURE: AHMAD ABUKISHK 03/25/2009