

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000006161

1. Entity Name
V.K. SAB'S, INC.



Principal Place of Business
**27050 SW 120TH AVE. RD.
 MIAMI, FL 33032**

Mailing Address
**27050 SW 120TH AVE. RD.
 MIAMI, FL 33032**



04062005 No Chg-P CR2E034 (10/03)

4. FEI Number
41-2075868

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**SABDUL, VICTOR D
 27050 SW 120TH AVE. RD.
 MIAMI, FL 33032**

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: *Victor Sabdul* **Victor SABDUL** **4-6-05**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$350.00

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	D SABDUL, VICTOR D 27050 SW 120TH AVE. RD. MIAMI, FL 33032
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SABDUL, KIMAL 27050 SW 120TH AVE. RD. MIAMI, FL 33032
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SABDUL, PAMELA 27050 SW 120TH AVE. RD. MIAMI, FL 33032
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1000000299194
 04/11/05-80093-018 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *Victor Sabdul* **Victor SABDUL** **4-6-05 (786-255-0541)**

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