

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000053112

Entity Name: B K ENTERPRISES, INC.

FILED
Jan 11, 2006
Secretary of State

Current Principal Place of Business:

3449 HIGH RIDGE ROAD
UNIT 2-24
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

3449 HIGH RIDGE ROAD
UNIT 2-24
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 55-0831221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERKMAN, KATRINA A
555 S POWERLINE ROAD
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

BERKMAN, KATRINA A
3449 HIGH RIDGE ROAD
BOYNTON BEACH, FL 33426 US

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:

01/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BERKMAN, KATRINA A
Address: 2150 LAKE IDA ROAD #5
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP () Delete
Name: KANICLIDES, ANDREW C
Address: 2150 LAKE IDA ROAD #5
City-St-Zip: DELRAY BEACH, FL 33445

Title: TRES (X) Delete
Name: KATRINA, BERKMAN A
Address: 2150 LAKE IDA ROAD #5
City-St-Zip: DELRAY BEACH, FL 33445

Title: SEC (X) Delete
Name: KATRINA, BERKMAN A
Address: 2150 LAKE IDA ROAD #5
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BERKMAN, KATRINA A
Address: 3449 HIGH RIDGE ROAD
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VP (X) Change () Addition
Name: KANICLIDES, ANDREW C
Address: 3449 HIGH RIDGE ROAD
City-St-Zip: BOYNTON BEACH, FL 33426

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 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: KATRINA A BERKMAN

PRES

01/11/2006

Electronic Signature of Signing Officer or Director

Date