


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000001274	
1. Entity Name ANKA ESHAK, P.A.	

Principal Place of Business MICHAEL SAUNDERS & COMPANY 1801 MAIN ST SARASOTA, FL 34236	Mailing Address MICHAEL SAUNDERS & COMPANY 1801 MAIN ST SARASOTA, FL 34236
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DO NOT WRITE IN THIS SPACE



03012008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0622031	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KOHL-HELBIG, LAUREN 1800 2ND ST STE 901 SARASOTA, FL 34236
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000899114 04/28/08 00026 000 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ESHAK, ANKA 484 PARTRIDGE CIR SARASOTA, FL 34236
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>ANKA ESHAK</i> ANKA ESHAK	Date <i>4/9/08</i>	Daytime Phone # <i>366-1113</i>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		