2007 FOR PROFIT CORPORATION. **ANNUAL REPORT** DOCUMENT # P04000066254 RK REAL PROPERTIES, INC. Principal Place of Business Mailing Address 16615 VALLELY DRIVE 16615 VALLELY DRIVE TAMPA, FL 33618 **TAMPA, FL 33618** 04112007 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number 57-1205925 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SADORF, RICK WESQ. 2201 NORTHEAST COCAHMAN ROAD SUITE 102

Apr 16, 2007 08:00 A Secretary of State

FILED

Applied For

\$8.75 Additional

Fee Required

Not Applicable

DO	NOT	WRITE
INI	FLHC	CDACE

CLEARWATER, FL 33765			IN THIS SPACE			
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.						
SIGNATURESignature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) . DATE						
Fil. After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000710641 04/25/07-80051-015 150.00	
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAH, RANDY 16615 VALLELY DRIVE TAMPA, FL 33618		DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-SI-ZIP						
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-07