

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 08, 2007 8:00 am**  
**Secretary of State**

05-08-2007 90106 001 \*\*\*300.00

**DOCUMENT # P04000088574**

1. Entity Name  
**K & K PRECIOUS ANGELS PARTY SERVICES CORP.**



Principal Place of Business  
**3176 NW 88 AVE SUNRISE  
SUNRISE, FL 33351**

Mailing Address  
**3176 NW 88 AVE SUNRISE  
SUNRISE, FL 33351**

**66013710**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04112007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

**20-1484983**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THOMPSON, RICK A  
3176 NW 88 AVE  
SUNRISE, FL 33331**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

*Rick A Thompson*  
**Rick A Thompson**

**4/21/07**

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME THOMPSON, DAMARIS G  
STREET ADDRESS 3176 NW 88 AVE  
CITY-ST-ZIP SUNRISE, FL 33351

TITLE VP ☐ Delete  
NAME THOMPSON, RICK A  
STREET ADDRESS 3176 NW 88 AVE  
CITY-ST-ZIP SUNRISE, FL 33351

TITLE DIR ☒ Delete  
NAME GUILLEN, JOSE A  
STREET ADDRESS 3178 NW 88 AVE  
CITY-ST-ZIP SUNRISE, FL 33351

TITLE DIR ☒ Delete  
NAME GUILLEN, RHODE E  
STREET ADDRESS 3178 NW 88 AVE  
CITY-ST-ZIP SUNRISE, FL 33351

TITLE SEC. ☒ Delete  
NAME SANDMIRE, DAYSI M  
STREET ADDRESS 4449 SAGO CIRCLE  
CITY-ST-ZIP WESTON, FL 33331

TITLE TRES ☒ Delete  
NAME GUILLEN, DERLYN M  
STREET ADDRESS 3178 NW 88 AVE  
CITY-ST-ZIP SUNRISE, FL 33351

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-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:

*Rick A Thompson*  
**Rick Thompson**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #