2006 FOR PROFIT CORPORATION

CITY-ST-ZIP

FILED ANNUAL REPORT Jan 12, 2006 08:00 AM **DOCUMENT # P04000121060 Secretary of State** 1. Entity Name LGK ENTERPRISES INC. Principal Place of Business Mailing Address **618 HOWARD CREEK LANE** 618 HOWARD CREEK LANE STUART, FL 34994 STUART, FL 34994 01062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 27-0100956 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KOTRBA, LINDA DO NOT WRITE **618 HOWARD CREEK LANE** STUART, FL 34994 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. (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. ΉŒ KOTRBA, LINDA 618 HOWARD CREEK LANE STREET ADDRESS Unnon0383846 01/13/06-80016-018 150.00 CITY-ST-ZIP STUART, FL 34994 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE DITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS COTY-ST-ZIP 7171 6 NAME STREET ADDRESS CITY-ST-7IP TITLE STREET ADDRESS

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: