2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000136069

Entity Name: L & K TRANSMISSION, INC.

FILED Jan 16, 2008 Secretary of State

Littly Na	me. Lakikan	SIVIISSICIN, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3325 PEO ORANGE	RIA RD PARK, FL 32065				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
3504 BARREL SPRINGS DRIVE ORANGE PARK, FL 32073			3325 PEORIA RD ORANGE PARK, FL	3325 PEORIA RD ORANGE PARK, FL 32065	
FEI Number	: 20-1744594	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
The above	RIA RD PARK, FL 32065		purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electronic	Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing T	rust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () De ROSA, LUIS 3504 BARREL SP ORANGE PARK, F	RINGS DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () De HERNANDEZ, FAN 8132 CREEDMOC JACKSONVILLE, F	INY R DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: LUIS ROSA PD 01/16/2008