

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000153281

Entity Name: AKAM LIVING SERVICES, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

6421 CONGRESS AVENUE
SUITE 110
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

6421 CONGRESS AVENUE
SUITE 110
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 20-1943070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAMINOFF, LESLIE
6421 CONGRESS AVENUE
SUITE 110
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: KAMINOFF, LESLIE
Address: 6421 CONGRESS AVENUE
City-St-Zip: BOCA RATON, FL 33487

Title: SD () Delete
Name: BERENSON, MICHAEL
Address: 6421 CONGRESS AVENUE
City-St-Zip: BOCA RATON, FL 33487

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KAMINOFF, LESLIE
Address: 6421 CONGRESS AVENUE STE 110
City-St-Zip: BOCA RATON, FL 33487

Title: SD (X) Change () Addition
Name: BERENSON, MICHAEL
Address: 6421 CONGRESS AVENUE STE 110
City-St-Zip: BOCA RATON, FL 33487

Title: VP () Change (X) Addition
Name: NEEDLEMAN, STEPHEN L
Address: 6421 CONGRESS AVENUE STE 110
City-St-Zip: BOCA RATON, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHEN L NEEDLEMAN

VP

04/29/2005

Electronic Signature of Signing Officer or Director

Date