2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000153750

1. Entity Name → PDK HOLDINGS, INC.



FILED Apr 09, 2008 08:00 Al Secretary of State

Principal Place of Business

3610 S. OCEAN BLVD

SUITE 304 PALM BEACH, FL 33480 Mailing Address

3610 S. OCEAN BLVD SUITE 304

PALM BEACH, FL 33480



DO	NOT	WRITF	IN THIS	SSPACE
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04052008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For Not Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

D'AGOSTINO, PETER 3610 S. OCEAN BLVD SUITE 304 PALM BEACH, FL 33480

SIGNATURE:

DO NOT WRITE IN THIS SPACE

7.7.2.11. 3.2.161.1, 1.2. 66.166								
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.	Signature, typed or printed name of registered agent and title	n' applicable. (NOTE: Registere	d Agent signature	e required when reinstating)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		\$5.00 May Be Added to Fees	U00000886850 04/18/08-80073-018 150.00			
10. OFFICERS AND DIRECTORS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P D'AGOSTINO, PETER 3610 S. OCEAN BLVD, SUITE 304 PALM BEACH, FL 33480							
NAME STREET ADDRESS CITY-ST-ZIP								
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY+ST-ZIP				IN '	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE 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 of 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.								

NTED NAME OF SIGNING OFFICER OR DIRECTOR