

2005 FOR PROFIT CORPORATION ANNUAL REPORT

07-05-2005 90222 019 ***150.00

P04000154024

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| | | | | | |
|---|----------------------------|---|--|--|--|
| DOCUMENT # P04000154024 1. Entity Name T & K ENTERPRISES OF VOLUSIA COUNTY, INC. | | | | | |
| Principal Place of Business 720 OLIVER DRIVE NEW SMYRNA BEACH, FL 32168 US | | | Mailing Address 720 OLIVER DRIVE NEW SMYRNA BEACH, FL 32168 US | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | | Country | | Zip | |
| | | | | Country | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | |
| RIOUX, TIMOTHY M 720 OLIVER DRIVE NEW SMYRNA BEACH, FL 32168 | | | | Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div> | |
| 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: <small>Signature, typed and printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | |
| FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. | | | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE | P | | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | RIOUX, KIM | | NAME | | |
| STREET ADDRESS | 720 OLIVER DRIVE | | STREET ADDRESS | | |
| CITY-ST-ZIP | NEW SMYRNA BEACH, FL 32168 | | CITY-ST-ZIP | | |
| TITLE | SRV | | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | RIOUX, TIMOTHY M | | NAME | | |
| STREET ADDRESS | 720 OLIVER DRIVE | | STREET ADDRESS | | |
| CITY-ST-ZIP | NEW SMYRNA BEACH, FL 32168 | | CITY-ST-ZIP | | |
| TITLE | V | | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | SAUMIER, LANCE R | | NAME | | |
| STREET ADDRESS | 217 OTTER BLVD | | STREET ADDRESS | | |
| CITY-ST-ZIP | NEW SMYRNA BEACH, FL 32168 | | CITY-ST-ZIP | | |
| TITLE | | | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | | NAME | | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | |
| TITLE | | | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | | NAME | | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | |
| TITLE | | | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | | NAME | | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | |
| 12. I hereby certify that the information supplied with this filing does not qualify 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 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: | | | 7-1-05 386 405 4923 <small>Signature and typed or printed name of signing officer or director</small> | | |



Handwritten signature/initials

**T & K Enterprises of Volusia County, Inc.
720 Oliver Drive
New Smyrna Beach, FL 32168-1802**

October 14, 2005


**Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

Re: Document #P04000154024

Dear Dept. of Revenue,

We recently received a notice of dissolution for the above corporation. We submitted an annual report in July of 2005 indicating we had not received our initial notice for renewal and submitted payment in the amount of \$150.00. According to a very nice gentleman in your office, you sent a response on July 7, 2005 asking for an additional late fee of \$400.00. The original \$150.00 was not returned to us. We did not receive that notice. After receiving a card in the mail from your office indicating we were being dissolved, we contacted your office and were told to send this letter and ask that you please accept the original \$150.00 as payment in full and waive the penalties and late fees due to the fact that we did not receive the original notice of the annual report. A copy of our annual report which was submitted in July is attached. Thank you for your help in clearing up this matter.

Sincerely,



**Kim Rioux, President
T & K Enterprises of Volusia County, Inc.**