


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2008 8:00 am
Secretary of State

02-06-2008 90032 037 ***150.00

DOCUMENT # P04000165755 1. Entity Name AKELIS, INC.																											
Principal Place of Business 1323 PINEBROOK WAY VENICE, FL 34285 US		Mailing Address 1323 PINEBROOK WAY VENICE, FL 34285 US																									
2. Principal Place of Business - No P.O. Box # 2809 HERMITAGE BLVD Suite, Apt. #, etc.		3. Mailing Address 2809 HERMITAGE BLVD Suite, Apt. #, etc.																									
City & State VENICE		City & State VENICE																									
Zip 34292	Country USA	Zip 34292	Country USA																								
4. FEI Number 20-1985265		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent BROWER, JOSEPH E 1323 PINEBROOK WAY VENICE, FL 34285		7. Name and Address of New Registered Agent Name BROWER, JOSEPH E Street Address (P.O. Box Number is Not Acceptable) 2809 HERMITAGE BLVD City VENICE FL 34292																									
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 or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">PRES</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2">BROWER, JOSEPH E</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">1323 PINEBROOK WAY</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">VENICE, FL 34285</td> </tr> </table>		TITLE	PRES	<input type="checkbox"/> Delete	NAME	BROWER, JOSEPH E		STREET ADDRESS	1323 PINEBROOK WAY		CITY-ST-ZIP	VENICE, FL 34285		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">PRES</td> <td style="width:20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2">BROWER, JOSEPH E</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">2809 HERMITAGE BLVD</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">VENICE, FL 34292</td> </tr> </table>		TITLE	PRES	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	BROWER, JOSEPH E		STREET ADDRESS	2809 HERMITAGE BLVD		CITY-ST-ZIP	VENICE, FL 34292	
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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 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 2 FEB 08 <small>Daytime Phone #</small>																									

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