

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000053530

1. Entity Name
TWO-K PROPERTIES, INC.



Principal Place of Business

205 WORTH AVENUE
SUITE 303
PALM BEACH, FL 33480 US

Mailing Address

205 WORTH AVENUE
SUITE 303
PALM BEACH, FL 33480 US

FILED
Apr 09, 2007 08:00 A
Secretary of State



04022007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-2660926

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BRIAN, PHILIPPE J
205 WORTH AVENUE
SUITE 303
PALM BEACH, FL 33480

**DO NOT WRITE
IN THIS SPACE**

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
KLEIN, FRANCIS
9445 EAST FAIRWAY TERRACE
WEST PALM BEACH, FL 33411

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVPT
KURSTEINER, WALTER
7947 VIA VILLAGIO
WEST PALM BEACH, FL 33412

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
BRIAN, PHILIPPE J
205 WORTH AVENUE
PALM BEACH, FL 33480

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000694532
04/17/07-80021-017 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WALTER KURSTEINER

04-04-07

Date

561-358-4314

Daytime Phone #