## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000075009  1. Entity Name TK'S TRIM, INC.							1- 1- 2007 SEP 20	P	1 2: 38
Principal Place of Business  Mailing Address  1614 ELSIE STREET  GREEN COVE SPRINGS, FL 32043  Mailing Address  1614 ELSIE STREET  GREEN COVE SPRINGS, FL				043			SECRETAR TALLAHASS		
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 3507 Alec Drive 3507 Alec [			)rive	2					
Suite, Apt. #, etc. Suite, Apt. #, etc.					08082007	Chg-P	CR2E034 (12	/06)	
City & Stat Midd	e leburgn, FL	City & State Middleburg, FL			4. FEI Number 20-290			<del>_,```</del>	olied For Applicable
Zip Country 32068		Zip Coun 32068		ntry	5. Certificate of Status Des		\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent					7. Name and	Address of New F			
AKEL, EDWARD C				Name					
1 INDEPE	NDENT DRIVE )1		Street Addres			er is Not Acceptable	e)		
JACKSON	VILLE, FL 32202								
<del></del>	T-0-0000-0-000-0-0-0-0-0-0-0-0-0-0-0-0-			City			FL (	Code	•
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 tide if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
FILE NOW!!! FEE IS \$550.00  Due by September 14, 2007  9. Election Campaign Financing \$5.00 May Be Added to Fees									
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	FICERS AND DIREC	TORS	IN 11
TITLE NAME	D KING, ROBERT TRAVIS	☐ Delete	TITL NAM				[X] Ch	ange	Addition
STREET ADDRESS					07 Alec [	)rive . FL 32068	o		
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NAME	WARD, SHANE R			-	<b>50</b>	0 <b>01097</b> /0701062	_	•	~
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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.									
9 1/2									
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date									

TK's Trim, Inc. 3507 Alec Drive Middleburg, FL 32068

August 10, 2007

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sir/Madam,

While working with my CPA, they realized the Annual Report fee had not been paid. This has never happened before. I have always paid the fee on time. But, this year I moved from 1614 Elsie Street, Green Cove Springs, FL 32043 to 3507 Alec Drive, Middleburg, FL 32068. Since the move, I have not received any notices from the Department of State. I have enclosed a check for \$150.00 and respectfully request that you waive the \$400.00 penalty this one time. My CPA firm has impressed upon me the importance of always paying in a timely matter and I do believe if it had not been for the move, I would have received your notice and paid timely.

Thank you for your assistance in this matter.

Respectfully,

Travis King President