

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000008568

**FILED**  
**Feb 09, 2007**  
**Secretary of State**

**Entity Name:** FLAGLER ASIAN MARKET, INC.

**Current Principal Place of Business:**

2405 EAST MOODY BLVD  
UNIT 201  
BUNNELL, FL 32110 US

**New Principal Place of Business:**

**Current Mailing Address:**

48 RYAN DR  
PALM COAST, FL 32164 US

**New Mailing Address:**

FEI Number: 20-4122180

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

KES, SOPHANNY  
48 RYAN DR  
PALM COAST ,, FL 32164 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KES, SOPHANNY  
Address: 48 RYAN DR  
City-St-Zip: PALM COAST, FL 32164 FL

Title: VP ( ) Delete  
Name: KES, TINA  
Address: 48 RYAN DR  
City-St-Zip: PALM COAST, FL 32164 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SOPHANNY KES

P

02/09/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date