

2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2007 OCT 23 PM 2:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PU6000118437

1. Entity Name
AHK ENTERPRISES, INC.



Principal Place of Business
1035 SPANISH RIVER RD.
APT. 207
BOCA RATON, FL 33432

Mailing Address
1035 SPANISH RIVER RD.
APT. 207
BOCA RATON, FL 33432



10172007 REIN-P CR2E098 (1/07)

2. Principal Place of Business - No P.O. Box #
1035 SPANISH RIVER RD
Suite, Apt. #, etc.
Apt 207

3. Mailing Address
1035 SPANISH RIVER RD
Suite, Apt. #, etc.
Apt 207

City & State
BOCA RATON FL

City & State
BOCA RATON, FL

4. FEI Number
20-5541749

Applied For
Not Applicable

Zip Country
33432 USA

Zip Country
33432 USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
HURDMAN, ANDREW
1035 SPANISH RIVER RD.
APT. 207
BOCA RATON, FL 33432

7. Name and Address of New Registered Agent
Name ANDY HURDMAN
Street Address (P.O. Box Number is Not Acceptable)
1035 SPANISH RIVER RD Apt 207
City BOCA RATON FL Zip Code 33432

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 DATE 10-17-07
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After January 1, 2008, Fee will be \$300.00
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PVST HURDMAN, ANDREW 1035 SPANISH RIVER RD. APT. 207 BOCA RATON, FL 33432 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D HURDMAN, ANDREW 1035 SPANISH RIVER RD. APT. 207 BOCA RATON, FL 33432 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700111193967 10/23/07--01016--022 **150.00
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: DATE 10-17-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

10/24/07