

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000133959

Entity Name: IKST, INC.

FILED
Apr 05, 2009
Secretary of State

Current Principal Place of Business:

20002 LAKE VISTA CIRCLE
LEHIGH ACRES, FL

New Principal Place of Business:

20002 LAKE VISTA CIRCLE
LEHIGH ACRES, FL 33936 US

Current Mailing Address:

P.O. BOX 1101
LEHIGH ACRES, FL 33970

New Mailing Address:

P.O. BOX 1101
LEHIGH ACRES, FL 33970 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STERR, KARL M D
20002 LAKE VISTA CIRCLE
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

STERR, KARL M PRES
20002 LAKE VISTA CIRCLE
LEHIGH ACRES, FL 33936 US

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: KARL STERR

04/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: STERR, KARL M D
Address: 20002 LAKE VISTA CIRCLE
City-St-Zip: LEHIGH ACRES, FL 33936 FL

Title: VP () Delete
Name: STERR, INGE M D
Address: 20002 LAKE VISTA CIRCLE
City-St-Zip: LEHIGH ACRES, FL 33936 FL

Title: D () Delete
Name: WEBER-KNOEFERL, SUSANNE
Address: GOERDELER STRASSE 49
City-St-Zip: UNTERHACHING, G 82008 G

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: STERR, KARL M
Address: 20002 LAKE VISTA CIRCLE
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: VP (X) Change () Addition
Name: STERR, INGE M
Address: 20002 LAKE VISTA CIRCLE
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: D (X) Change () Addition
Name: WEBER-KNOEFERL, SUSANNE
Address: GOERDELER STRASSE 49
City-St-Zip: UNTERHACHING/GERMANY, G 82008 G

I hereby certify that the information supplied with this filing does not qualify 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: KARL STERR

P

04/05/2009

Electronic Signature of Signing Officer or Director

Date