## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000064596

Entity Name: SP&KP INC.

FILED Jan 19, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2900 NW 42ND AVENUE 5481 W. ATLANTIC BLVD #A104 MARGATE, FL 33063

COCONUT CREEK, FL 33066

Current Mailing Address: New Mailing Address:

2900 NW 42ND AVENUE 5481 W. ATLANTIC BLVD #A104 MARGATE, FL 33063

COCONUT CREEK, FL 33066

FEI Number: 26-0288527 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CAROTHERS, SCOTT W

10275 W SAMPLE ROAD

CORAL SPRINGS, FL 33065 US

SOUTH FLORIDA TAX, INC.
5001 S. UNIVERSITY DRIVE
SUITE B
DAVIE, FL 33328 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: SCOTT E. ITKIN 01/19/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition PARMAR, SANDIP PARMAR, SANDIP Name: Name: 2900 NW 42ND AVENUE 5481 W. ATLANTIC BLVD Address: Address: City-St-Zip: COCONUT CREEK, FL 33066 City-St-Zip: MARGATE, FL 33063

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition
Name: PARMAR KAREN
Name: PARMAR KAREN

 Name:
 PARMAR, KAREN
 Name:
 PARMAR, KAREN

 Address:
 2900 NW 42ND AVENUE
 Address:
 5481 W. ATLANTIC BLVD

 City-St-Zip:
 COCONUT CREEK, FL 33066
 City-St-Zip:
 MARGATE, FL 33063

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: SANDIP PARMAR P 01/19/2008