

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2008 8:00 am
Secretary of State

04-22-2008 90019 042 ***158.75

DOCUMENT # P07000066291

1. Entity Name
A & K GOLDY, INC.



Principal Place of Business 4730 BURLINGTON AVE N ST PETERSBURG FL 33713	Mailing Address 4730 BURLINGTON AVE N ST PETERSBURG FL 33713
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2. Principal Place of Business - No P.O. Box # 1296 1ST STREET	3. Mailing Address 1296 1ST STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State Sarasota, FL	City & State SARASOTA, FL	4. FEI Number 26-6343365	Applied For <input type="checkbox"/> Not Applicable
Zip 34236	Country Sarasota	Zip 34236	Country SARASOTA

5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**VOIGT, STEPHEN F SR
 VOIGT & VOIGT, P.A.
 2042 BEE RIDGE RD
 SARASOTA FL 34239**

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip 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 _____ DATE _____

Signature, typed or printed name of registered agent (if applicable). (NOTE: Registered Agent signature required when non-stating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		
TITLE P	<input type="checkbox"/> Delete	
NAME GOLDBERG, ARIBERT		
STREET ADDRESS 4730 BURLINGTON AVE N		
CITY-ST-ZIP ST PETERSBURG FL 33713		
TITLE S	<input type="checkbox"/> Delete	
NAME GOLDBERG, KERSTIN		
STREET ADDRESS 4730 BURLINGTON AVE N		
CITY-ST-ZIP ST PETERSBURG FL 33713		
TITLE VP	<input checked="" type="checkbox"/> Delete	
NAME GANSEL, DIANA		
STREET ADDRESS 4730 BURLINGTON AVE N		
CITY-ST-ZIP ST PETERSBURG FL 33713		
TITLE NAME	<input type="checkbox"/> Delete	
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME	<input type="checkbox"/> Delete	
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME	<input type="checkbox"/> Delete	
STREET ADDRESS CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Kerstin Goldberg*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/08/2008
 DATE

Daytime Phone #