

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90058 025 ***150.00

DOCUMENT # P93000085954



1. Entity Name
D H K CORPORATION

Principal Place of Business
**8716 INGLETON COURT
ORLANDO, FL 32836**

Mailing Address
**8716 INGLETON COURT
ORLANDO, FL 32836**

94043426



2. Principal Place of Business
150 ISLANDER COURT

3. Mailing Address
150 ISLANDER COURT

Suite, Apt. #, etc.
172

Suite, Apt. #, etc.
172

03262004

Chg-P

CR2E034 (10/03)

City & State
LONGWOOD, FL.

City & State
LONGWOOD, FL.

4. FEI Number
65-0455515
65-0453515

Applied For
☐ Not Applicable

Zip
32750

Country
USA

Zip
32750

Country
USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GORDON, HOWARD W
FOWLER, WHITE ET AL
100 S.E. 2ND ST., 17 FLOOR
MIAMI, FL 33131**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **KURLAND, BERTRAM**
STREET ADDRESS **20281 E COUNTRY CLUB DR APT 2101**
CITY-ST-ZIP **AVENTURA, FL 33180**

TITLE **ST** ☐ Delete
NAME **KURLAND, AMY**
STREET ADDRESS **8716 INGLETON CT.**
CITY-ST-ZIP **ORLANDO, FL 32836**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **150 ISLANDER COURT #172**
CITY-ST-ZIP **LONGWOOD, FL. 32750**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **150 ISLANDER COURT #172**
CITY-ST-ZIP **LONGWOOD, FL. 32750**

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: BERTRAM H KURLAND
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/10/04 **2407-767-6710**
Date Daytime Phone #