


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 29, 2005 8:00 am**  
**Secretary of State**

04-29-2005 90218 030 \*\*\*150.00

<b>DOCUMENT # P94000062428</b>		
1. Entity Name <b>R &amp; K ELECTRONICS CORPORATION</b>		

Principal Place of Business <b>7912 SONOMA SPRINGS CIRCLE STE 208 LAKE WORTH FL 33463</b>	Mailing Address <b>7912 SONOMA SPRINGS CIRCLE STE 208 LAKE WORTH FL 33463</b>
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2. Principal Place of Business <b>223 Lakeview Drive</b>	3. Mailing Address <b>223 Lakeview Dr.</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E034 (10/04)

City & State <b>Coral Springs FL</b>	City & State <b>Coral Springs</b>
Zip <b>33071-4003</b>	Zip <b>FL 33071-4003</b>
Country <b>USA</b>	Country

4. FEI Number <b>65-0516709</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent <b>ESPOSITO, ROY A 7912 SONOMA SPRINGS CIRCLE STE 208 LAKE WORTH FL 33463</b>	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
<b>FL</b>	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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ESPOSITO, ROY A <del>7912 SONOMA SPRINGS CIRCLE STE 208</del> <del>LAKE WORTH FL 33463</del>	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPST ESPOSITO, ROY A <del>7912 SONOMA SPRINGS CIRCLE STE 208</del> <del>LAKE WORTH FL 33463</del>	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition

*Change Address Only  
SEE ABOVE*

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SEE ABOVE*

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: 	4.22.05	561-6013215
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #