


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 26, 2008 08:00 AM
Secretary of State

DOCUMENT # P96000066323 1. Entity Name LIK, INC.	
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Principal Place of Business 703 SHORE DR VERO BEACH, FL 32963	Mailing Address 703 SHORE DR VERO BEACH, FL 32963
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DO NOT WRITE IN THIS SPACE



03182008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0696423	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANDERSON-FINDLEY, PAULA
703 SHORE DRIVE
VERO BEACH, FL 32963

**DO NOT WRITE
IN THIS SPACE**

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 _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000870701 04/09/08-80091-010 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANDERSON-FINDLEY, PAULA 703 SHORE DR VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS ANDERSON, CRAIG S 703 SHORE DR VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAS ANDERSON, ANGELA F 703 SHORE DR VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Paula Anderson-Findley* *Paula Anderson-Findley* 3/18/08 (772) 234-271
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone's