

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000086803

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** KARIKAS ENTERPRISES, INC.

**Current Principal Place of Business:**

7038 CENTRAL AVE.  
SAINT PETERSBURG, FL 33707

**New Principal Place of Business:**

**Current Mailing Address:**

7038 CENTRAL AVE.  
SAINT PETERSBURG, FL 33707

**New Mailing Address:**

**FEI Number:** 59-3536646

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KARIKAS, DEAN W  
3643 1ST AVENUE NORTH  
ST. PETERSBURG, FL 33713 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: SPD  
Name: KARIKAS, JULIE  
Address: 5702 - 19TH AVE. S.  
City-St-Zip: GULFPORT, FL 33707

Title: TDV  
Name: KARIKAS, DEAN W  
Address: 3643 - 1ST AVE. N.  
City-St-Zip: ST. PETERSBURG, FL 33713

I hereby 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 all other like empowered.

SIGNATURE: JULIE D. KARIKAS

OWNE

04/26/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date