

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 09, 2006 08:00 AM
Secretary of State**

DOCUMENT # P99000096995

1. Entity Name

B & K ENTERPRISES OF PASCO, INC.



Principal Place of Business

2027 GRAND BLVD.
HOLIDAY, FL 34690

Mailing Address

2027 GRAND BLVD.
HOLIDAY, FL 34690



01062006

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3606527

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KIRIWAS, ANTON
2027 GRAND BLVD
HOLIDAY, FL 34690

**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

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME KIRIWAS, ANTON
STREET ADDRESS 2027 GRAND BLVD.
CITY-ST-ZIP HOLIDAY, FL 34690

TITLE VPD
NAME KIRIWAS, ANGELA M
STREET ADDRESS 2027 GRAND BLVD.
CITY-ST-ZIP HOLIDAY, FL 34690

TITLE
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02/20/06-80061-021 150.00

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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 changed, or on an attachment with an address, with all other, like empowered.

SIGNATURE:

Angela M. Kiribas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/06
Date

727-967-3726
Daytime Phone #