

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 20, 2005 8:00 am**  
**Secretary of State**

05-20-2005 90032 004 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                    |                                                                                                                                                           |                                                                 |                                                                                   |                                                                   |
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| <b>DOCUMENT # P02000066413</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                    |                                                                                                                                                           |                                                                 |  |                                                                   |
| 1. Entity Name<br><b>MAKALY CORPORATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                    |                                                                                                                                                           |                                                                 |                                                                                   |                                                                   |
| Principal Place of Business<br><b>13762 SW 8 STREET<br/>MIAMI, FL 33186</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                    |                                                                                                                                                           | Mailing Address<br><b>13762 SW 8 STREET<br/>MIAMI, FL 33186</b> |                                                                                   |                                                                   |
| 2. Principal Place of Business<br><b>13262 SW 8th St.<br/>MIAMI, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                    |                                                                                                                                                           | 3. Mailing Address<br><b>13262 SW 8th St.<br/>MIAMI, FL</b>     |                                                                                   |                                                                   |
| 4. FEI Number<br><b>75-3071429</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                    |                                                                                                                                                           | Applied For<br><input type="checkbox"/> Not Applicable          |                                                                                   |                                                                   |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                    |                                                                                                                                                           |                                                                 |                                                                                   |                                                                   |
| 6. Name and Address of Current Registered Agent<br><b>ABRAMSON, EDWARD J<br/>7270 N.W. 12TH STREET STE 580<br/>MIAMI, FL 33126</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                    | 7. Name and Address of New Registered Agent<br>Name: _____<br>Street Address (P.O. Box Number is Not Acceptable): _____<br>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 this obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                    |                                                                                                                                                           |                                                                 |                                                                                   |                                                                   |
| SIGNATURE: _____ (PRINTED: Registered Agent signature required when accepting)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                    |                                                                                                                                                           |                                                                 |                                                                                   |                                                                   |
| <b>FILE NOW!! FEE IS \$150.00<br/>After May 1, 2005 Fee will be \$650.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                    | 9. Election Campaign Financing<br>Trust Fund Contribution: <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>                                    |                                                                 |                                                                                   |                                                                   |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                    |                                                                                                                                                           | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11           |                                                                                   |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | PD<br>PAREDES, EDELMIRA<br>13762 SW 8 STREET<br>MIAMI, FL 33186    | <input type="checkbox"/> Delete                                                                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                  | Paredes Edelmira<br>13262 SW 8th St.<br>MIAMI, FL 33184                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | VD<br>GONZALEZ, IVAN<br>13762 SW 8 STREET<br>MIAMI, FL 33186       | <input type="checkbox"/> Delete                                                                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                  | Gonzalez Ivan<br>13262 SW 8th St.<br>MIAMI, FL 33184                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | SD<br>GONZALEZ, ALBERTO<br>13762 SW 8 STREET<br>MIAMI, FL 33186    | <input checked="" type="checkbox"/> Delete                                                                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                  | Matas, Maria Yolanda<br>13262 SW 8th St.<br>MIAMI, FL 33184                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | TD<br>MATAS, MARIA YOLANDA<br>13762 SW 8 STREET<br>MIAMI, FL 33186 | <input type="checkbox"/> Delete                                                                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                  |                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                    | <input type="checkbox"/> Delete                                                                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                  |                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                    | <input type="checkbox"/> Delete                                                                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                  |                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report of annual 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 my address, with all other like empowered. |                                                                    |                                                                                                                                                           |                                                                 |                                                                                   |                                                                   |
| SIGNATURE: <u>Y. Paredes</u> <b>04/29/05</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                    |                                                                                                                                                           |                                                                 |                                                                                   |                                                                   |