2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007
Secretary of State

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Entity Name: MK&B ENTERPRISES, INC.

Current Principal Place of Business:

C/O BAKKALAPULO & BOUTZOUKAS, P.A.
111 N. BLECHER RD., SUITE 201
CLEARWATER, FL 33765

New Principal Place of Business:

C/O BAKKALAPULO & BOUTZOUKAS, P.A.
111 N. BELCHER RD., SUITE 201
CLEARWATER, FL 33765

Current Mailing Address:

C/O BAKKALAPULO & BOUTZOUKAS, P.A.
111 N. BLECHER RD., SUITE 201
CLEARWATER, FL 33765

New Mailing Address:

C/O BAKKALAPULO & BOUTZOUKAS, P.A.
111 N. BELCHER RD., SUITE 201
CLEARWATER, FL 33765

FEI Number: 04-3708425 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOUTZOUKAS, MICHAEL E ESQ
111 N. BELCHER RD
SUITE 201
CLEARWATER, FL 33765 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KASTRENAKES, MICHAEL
Address: P.O. BOX 2460
City-St-Zip: PALM HARBOR, FL 34682

Title: D (X) Delete
Name: KASTRENAKES, MARIA
Address: P.O. BOX 2460
City-St-Zip: PALM HARBOR, FL 34682

Title: VPD ( ) Delete
Name: BOUTZOUKAS, MIA
Address: P.O. BOX 2460
City-St-Zip: PALM HARBOR, FL 34682

Title: D (X) Delete
Name: BOUTZOUKAS, JAMES
Address: P.O. BOX 2460
City-St-Zip: PALM HARBOR, FL 34682

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MIA BOUTZOUKAS VPD 04/26/2007

Electronic Signature of Signing Officer or Director — Date