

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000097156

FILED  
Jul 08, 2005  
Secretary of State

Entity Name: M & K PAINTING INCORPORATED

## Current Principal Place of Business:

904 SKYVIEW DRIVE  
BRANDON, FL 33510

## New Principal Place of Business:

## Current Mailing Address:

904 SKYVIEW DRIVE  
BRANDON, FL 33510

## New Mailing Address:

FEI Number: 20-1424654

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOKDAD, KIRIM SHERF  
904 SKYVIEW DRIVE  
BRANDON, FL 33510 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PR ( ) Delete  
Name: MOKDAD, KARIM PRES.  
Address: 904 SKYVIEW DRIVE  
City-St-Zip: BRANDON, FL 33510

Title: VP ( ) Delete  
Name: KELLY, JOHN VP  
Address: 904 SKYVIEW DRIVE  
City-St-Zip: BRANDON, FL 33510

Title: CEO ( ) Delete  
Name: SCOTT, KATHERINE CEO  
Address: 904 SKYVIEW DRIVE  
City-St-Zip: BRANDON, FL 33510

## 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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KIRIM SHERF MOKDAD

PRES

07/08/2005

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

\_\_\_\_\_  
Date