


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90368 037 \*\*\*150.00

<b>DOCUMENT # P05000130578</b>		
1. Entity Name M. K. KRIEGER INVESTMENTS, INC.		

Principal Place of Business C/O ENGELBERG & MILGRIM, P.A. 3230 STIRLING ROAD, SUITE 1 HOLLYWOOD, FL 33021	Mailing Address C/O ENGELBERG & MILGRIM, P.A. 3230 STIRLING ROAD, SUITE 1 HOLLYWOOD, FL 33021
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2. Principal Place of Business c/o Engelberg & Milgrim Suite, Apt. #, etc. 4040 Sheridan Street	3. Mailing Address c/o Engelberg & Milgrim Suite, Apt. #, etc. 4040 Sheridan Street
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City & State Hollywood, FL	City & State Hollywood, FL
Zip 33021	Country USA

40074147

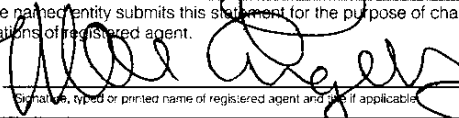


04262006 Chg-P CR2E034 (11/05)

4. FEI Number 20-3902724	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ENGELBERG, MORRIS C/O ENGELBERG & MILGRIM, P.A. 3230 STIRLING ROAD, SUITE 1 HOLLYWOOD, FL 33021	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4040 Sheridan Street City Hollywood FL Zip Code 33021
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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.

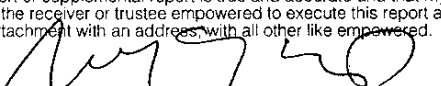
SIGNATURE  DATE 04/26/2006

(NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD KRIEGER, MYLES K 1150 NORTH 35TH AVENUE, SUITE 205 HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS 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 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 if changed, or on an attachment with an address with all other like empowered.

**SIGNATURE:**  **Myles Krieger, President** 04/26/2006 954-963-3222

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #