* 2005 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 19, 2005 08:00 AM **DOCUMENT # P94000043035** Secretary of State 1. Entity Name MAKÉRY CORPORATION Principal Place of Business Mailing Address 1016-18 BIARRITZ DRIVE 1095 N SHORE DR MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33141 US 03142005 CR2E034 (10/03) No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0511921 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WASERSTEIN, RICHARD DO NOT WRITE 913 NORMANDY DRIVE MIAMI BEACH, FL 33141 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, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be U00000269437 FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 03/19/05-80011-023 150.00 10. OFFICERS AND DIRECTORS **PVST** TITLE NAME BRILL, SARA 1016-18 BIARRITZ DRIVE STREET ADDRESS MIAMI BEACH, FL 33141 CITY-ST-ZIP TITLE BRILL, SARA NAME STREET ADDRESS 1016-18 BIARRITZ DRIVE MIAMI BEACH, FL 33141 CITY-SY-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE

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 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:

NAME STREET ADDRESS CITY - SY - ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OF PRINTED HAVE OF

214-05

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