

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2008 8:00 am**  
**Secretary of State**

04-25-2008 90124 022 \*\*\*150.00

<b>DOCUMENT # 825212</b> 1. Entity Name <b>THE KISLAK COMPANY, INC.</b>					
Principal Place of Business <b>7900 MIAMI LAKES DR. W. MIAMI LAKES, FL 33016-2897</b>			Mailing Address <b>7900 MIAMI LAKES DR. W. MIAMI LAKES, FL 33016-2897</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip      Country		City & State  Zip      Country		04222008      Chg-P      CR2E034 (12/06)	
4. FEI Number <b>22-1913039</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>RODRIGUEZ, CHRISTY 7900 MIAMI LAKES DR. W. MIAMI LAKES, FL 33016</b>			7. Name and Address of New Registered Agent Name <b>Christy Complo</b> Street Address (P.O. Box Number is Not Acceptable) <b>7900 Miami Lakes Drive West</b> City <b>Miami Lakes</b> <b>FL</b> Zip Code <b>33016</b>		
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 <u><b>Christy Complo, AVP</b></u> <i>Christy Complo</i> <b>4/22/08</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KISLAK, JAY 7900 MIAMI LAKES DR. W. MIAMI LAKES, FL 33016 <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	SVP STILES, LINDA M 1000 RT. 9 WOODBIDGE, NJ 07095 <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	AVP RODRIGUEZ, CHRISTY 7900 MIAMI LAKES DR. W. MIAMI LAKES, FL 33016 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Complo, Christy 7900 Miami Lakes Drive West Miami Lakes, FL 33016 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSVP BARTELMO, THOMAS 7900 MIAMI LAKES DR, WEST MIAMI LAKES, FL 33016 <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	P WIENER, JEFFREY 1000 ROUTE 9 WOODBIDGE, NJ 07095 <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		
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: <u><b>Christy Complo, AVP</b></u> <i>Christy Complo</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<b>4/22/08</b> <b>(305) 364-4101</b> <small>Date      Daytime Phone #</small>		