

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 149548

FILED
Jan 05, 2008
Secretary of State

Entity Name: MAC CORPORATION

Current Principal Place of Business:

91 KNOLLWOOD AVE
HUNTINGTON, NY 11745

New Principal Place of Business:

91 KNOLLWOOD AVE
HUNTINGTON, NY 11743

Current Mailing Address:

91 KNOLLWOOD AVE
HUNTINGTON, NY 11745

New Mailing Address:

91 KNOLLWOOD AVE
HUNTINGTON, NY 11743

FEI Number: 59-0672763 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOUIS FINE
6016 SW 13TH TERR
MIAMI, FL 33144 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: CHALEK, ROSE MARIE,
Address: 91 KNOLLWOOD AVE
City-St-Zip: HUNTINGTON, FL 11745

Title: ST () Delete
Name: CHALEK, RICHARD,
Address: 40 MAPLE AVENUE
City-St-Zip: LOCUST VALLEY, NY

Title: V () Delete
Name: CHALEK, RICHARD
Address: 91 KNOLLWOOD AVE
City-St-Zip: HUNTINGTON, NY 11745

Title: T () Delete
Name: CHALEK, PAMELA
Address: 40 MAPLE AVE.
City-St-Zip: LOCUST VALLEY, NY 11560

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHALEK, ROSE MARIE,
Address: 91 KNOLLWOOD AVE
City-St-Zip: HUNTINGTON, FL 11743

Title: ST (X) Change () Addition
Name: CHALEK, RICHARD,
Address: 40 MAPLE AVENUE
City-St-Zip: LOCUST VALLEY, NY 11560

Title: V (X) Change () Addition
Name: CHALEK, RICHARD
Address: 40 MAPLE AVE
City-St-Zip: LOCUST VALLEY, NY 11560

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: RICHARD CHALEK

ST/V

01/05/2008

Electronic Signature of Signing Officer or Director

_____ Date