2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # 825212

1. Entity Name
THE KISLAK COMPANY, INC.

Principal Place of Business	Mailing Address
7900 MIAMI LAKES DR. W. MIAMI LAKES, FL 33016-2897	7900 MIAMI LAKES DR. W. MIAMI LAKES, FL 33016-2897

04192005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
22-1913039
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, CHRISTY
7900 MIAMI LAKES DR W.
MIAMI LAKES, FL 33016

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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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000339614
04/28/05-80079-015 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	KISLAK, JAY
STREET ADDRESS	7900 MIAMI LAKES DR. W.
CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	SVP
NAME	STILES, LINDA M
STREET ADDRESS	1000 RT. 9
CITY-ST-ZIP	WOODBRIDGE, NJ 07095
TITLE	AVP
NAME	RODRIGUEZ, CHRISTY
STREET ADDRESS	7900 MIAMI LAKES DR. W.
CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	DSVP
NAME	BARTELMO, THOMAS
STREET ADDRESS	7900 MIAMI LAKES DR, WEST
CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	P
NAME	WIENER, JEFFREY
STREET ADDRESS	1000 ROUTE 9
CITY-ST-ZIP	WOODBRIDGE, NJ 07095
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Christy Rodriguez AVP 4/26/05 (305) 364-4101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #