

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000000449

1. Entity Name

MHK ENTERPRISES CORP.

Principal Place of Business

7215 LOS PINOS BLVD.
CORAL GABLES FL 33143

Mailing Address

7215 LOS PINOS BLVD.
CORAL GABLES FL 33143

2. Principal Place of Business

4101 DAVIE RD. EXT.

Suite, Apt. #, etc.

3. Mailing Address

4101 DAVIE RD. EXT.

Suite, Apt. #, etc.

City & State

Hollywood - FL.

City & State

Hollywood - FL.

Zip

33024

Country

USA

Zip

33024

Country

USA

4. FEI Number

65-0798367

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FEUERMAN, JONATHAN
ONE S.E. THIRD AVE., SUITE 2400
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCD
KING, SIN MAN
7215 LOS PINOS BLVD.
CORAL GABLES FL 33143 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
KING, KITTY
7215 LOS PINOS BLVD.
CORAL GABLES FL 33143 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
KING, KELLER
7215 LOS PINOS BLVD.
CORAL GABLES FL 33143 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
KING, QUENNI
7215 LOS PINOS BLVD.
CORAL GABLES FL 33143 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
9464 NW 52 DORAL LANE
MIAMI - FL. 33178

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
SAME AS ABOVE "

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
"

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
1240 NW 151 AVE
Pembroke Pines, FL. 33028

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/6/01

Date

305-571-7777

Daytime Phone #

FILED
Sep 05, 2001 8:00 am
Secretary of State

09-05-2001 90029 008 ***150.00



DO NOT WRITE IN THIS SPACE

0176266

CR2034 (10/00)