

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K78165

FILED
Aug 30, 2006
Secretary of State

Entity Name: MATKIM INDUSTRIES, INC.

Current Principal Place of Business:

3001 NORTHWEST 60TH STREET
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 168
OXFORD, MA 01540

New Mailing Address:

FEI Number: 65-0115624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHENKER, MATTHEW
3001 NORTHWEST 60TH STREET
FT. LAUDERDALE, FL 33309 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: SHENKER, MATTHEW
Address: 2 HAWKSLEY DRIVE
City-St-Zip: OXFORD, MA 01540

Title: D () Delete
Name: ROWLAND, PAUL
Address: 2 HAWKSLEY DR., P.O. BOX 168
City-St-Zip: OXFORD, MA 01540

Title: S () Delete
Name: BUTMAN, CHARLES
Address: 3001 NORTHWEST 60TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: D () Delete
Name: WISE, PETER
Address: 2 HAWKSLEY DRIVE, PO BOX 168
City-St-Zip: OXFORD, MA 01540

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MATTHEW SHENKER

PD

08/30/2006

Electronic Signature of Signing Officer or Director

_____ Date