

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000009693 1. Entity Name MK REMODELING, LLC	
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Principal Place of Business 16858 115TH TRAIL NORTH JUPITER FL 33478 US	Mailing Address 16858 115TH TRAIL NORTH JUPITER FL 33478 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 20-0740513	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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1st MOORE CR2E083 (10/06)

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
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CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) City
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Name Street Address (P.O. Box Number is Not Acceptable) City	State: FL Zip Code
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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	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2007

9. MANAGING MEMBERS/MANAGERS	10. ADDITIONS/CHANGES
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TITLE	NAME	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MGRM KULIK, MICHAEL K	<input type="checkbox"/>	NAME		
STREET ADDRESS	16858 115TH TRAIL NORTH		STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL 33478		CITY-ST-ZIP		

U00000632852
02/21/07-80039-002 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.