

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000008833

Entity Name: MAKINEN, INC.

**FILED**  
**Jan 31, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

949 NW 31ST AVE  
POMPANO BEACH, FL 33069 US

**New Principal Place of Business:**

**Current Mailing Address:**

949 NW 31ST AVE  
POMPANO BEACH, FL 33069 US

**New Mailing Address:**

FEI Number: 65-0983083

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AR ACCOUNTING & TAX SERVICES  
7301 WILES ROAD STE 107  
CORAL SPRINGS, FL 33067 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LAHDESMÄKI, SAMELI  
Address: 8076 EMERALD WINDS CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33473 US

Title: SD  
Name: MAKINEN, ISMO  
Address: 949 NW 31ST AVE  
City-St-Zip: POMPANO BEACH, FL 33069

Title: O  
Name: STEPHENS, TARJA  
Address: 13056 NW 14TH ST  
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby 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 all other like empowered.

SIGNATURE: SPYROS VLAMIS

A

01/31/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date