

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000050069

FILED  
Jan 03, 2008  
Secretary of State

Entity Name: KWIAT MARKETING ASSOCIATES CORP.

## Current Principal Place of Business:

10185 COLLINS AVENUE  
SUITE 808  
BAL HARBOUR, FL 33154

## New Principal Place of Business:

## Current Mailing Address:

10185 COLLINS AVENUE  
SUITE 808  
BAL HARBOUR, FL 33154

## New Mailing Address:

FEI Number: 65-1010826      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KWIAT, DAVID  
10185 COLLINS AVE #808  
BAR HARBOUR, FL 33154      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: KWIAT, DAVID  
Address: 10185 COLLINS AVE #808  
City-St-Zip: BAL HARBOUR, FL 33154

Title: VD ( ) Delete  
Name: KWIAT, HANNAH  
Address: 10185 COLLINS AVE #808  
City-St-Zip: BAL HARBOUR, FL 33154

Title: TD ( ) Delete  
Name: KWIAT, RUSSELL  
Address: 10185 COLLINS AVE #808  
City-St-Zip: BAL HARBOUR, FL 33154

## 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:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID KWIAT

PRES

01/03/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date