2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P0000066069 1. Entity Name MKV CORPORATION, INC.					~ ~	or cury or state
Principal Place 66 NORTH TO OSPREY, FL	amiami trail	Mailing Address 66 NORTH TAMIAMI TRAIL OSPREY, FL 34229				
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent					lo Chg-P	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
MEHTA, NICK 7956 MEADOWS RUSH LOOP SARASOTA, FL 34238-4318			DO NOT WRITE IN THIS SPACE			
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 Sgrature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating). DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 Trust Fund Contribution.						
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF P MEHTA, NICK 7956 MEADOWS RUSH LOOP SARASOTA, FL 34238	ECTORS			ក្រស់ខ្លាស់ព្រះ ក្រស់សុំព្រះ	(49294 30(40-016 150.00
TITLE NAME STREET ADDRESS CITY-S1-ZIP				DO N	OT W	RITE
TITLE NAME STREET ADDRESS CITY - ST - ZIP				IN TH	iis sp	ACE
TITLE NAME STREET ADDRESS GITY - ST - ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I nereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						
SIGNATURE: X SIGNATURE AND TYPEONY PRINTED NAME OF SIGNING OFFICER OF DIRECTOR Date Dayone Proces						