

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000030462

FILED
Mar 29, 2009
Secretary of State**Entity Name:** MIKEL FINANCIAL SERVICES, INC.**Current Principal Place of Business:**2816 SAN RAFAEL STREET
TAMPA, FL 33629**New Principal Place of Business:**4711 S. HIMES AVENUE
#1602
TAMPA, FL 33611**Current Mailing Address:**2816 SAN RAFAEL STREET
TAMPA, FL 33629**New Mailing Address:**4711 S. HIMES AVENUE
#1602
TAMPA, FL 33611**FEI Number:** 45-0468467**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LEE, ROBERT G
2816 SAN RAFAEL STREET
TAMPA, FL 33629 US**Name and Address of New Registered Agent:**LEE, ROBERT G
4711 S. HIMES AVENUE
#1602
TAMPA, FL 33611 US

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

03/29/2009

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: LEE, ROBERT G
Address: 2816 SAN RAFAEL ST
City-St-Zip: TAMPA, FL 33629**Title:** VP () Delete
Name: LEE, MARY KAY
Address: 2816 SAN RAFAEL ST
City-St-Zip: TAMPA, FL 33629**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: LEE, ROBERT G
Address: 4711 S. HIMES AVENUE #1602
City-St-Zip: TAMPA, FL 33611**Title:** VP (X) Change () Addition
Name: LEE, MARY KAY
Address: 4711 S. HIMES AVENUE #1602
City-St-Zip: TAMPA, FL 33611

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: ROBERT G. LEE

Electronic Signature of Signing Officer or Director

PRES

03/29/2009

Date