

Apr. 25. 2008 4:20PM

No. 2418 P. 3

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000066240	
1. Entity Name M.H.K. FINANCIAL INC.	

Principal Place of Business 3251 CARAMBOLA CIRCLE SOUTH COCONUT CREEK, FL 33066	Mailing Address 3251 CARAMBOLA CIRCLE SOUTH COCONUT CREEK, FL 33066
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04252008 No Chg-P CR2E034 (11/06)

4. FEI Number
03-0471405

Applied For	Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent KORNITSKY, MYRON 3251 CARAMBOLA CIRCLE SOUTH COCONUT CREEK, FL 33068
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**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KORNITSKY, MYRON 3251 CARAMBOLA CIRCLE SOUTH COCONUT CREEK, FL 33066
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD KORNITSKY, JUDITH 3251 CARAMBOLA CIRCLE SOUTH COCONUT CREEK, FL 33068
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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05/21/08-80053-025 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 to this statement, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/08