2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000110379

Entity Name: 3MK IMPORTS INC

FILED Jan 21, 2009 Secretary of State

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|---|---|---|
| Current Principal Place of Business: | | New Principal Place of Business: |
| 7211 WILS WEST PAI | SON RD. LM BEACH, FL 33413 | 11586 PIERSON ROAD SUITE L-6 WELLINGTON, FL 33414 |
| Current M | lailing Address: | New Mailing Address: |
| 7211 WILS WEST PAI | SON RD. LM BEACH, FL 33413 | 11586 PIERSON ROAD SUITE L-6 WELLINGTON, FL 33414 |
| FEI Number: | : 55-0848238 FEI Number Applied For | () FEI Number Not Applicable () Certificate of Status Desired () |
| Name and | Address of Current Registered Ag | ent: Name and Address of New Registered Agent: |
| 7211 WILS | S, KRISTINA M SON RD. LM BEACH, FL 33413 US | DERDA (JAGOSITS), KRISTINA M 7211 WILSON RD. WEST PALM BEACH, FL 33413 US |
| | named entity submits this statement f e of Florida. | or the purpose of changing its registered office or registered agent, or both, |
| SIGNATUR | RE: KRISTINA DERDA (JAGOSITS) | 01/21/2009 |
| | Electronic Signature of Registe | red Agent Date |
| Election Car | mpaign Financing Trust Fund Contribution | (). |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |
| Title: Name: Address: City-St-Zip: Title: | D () Delete JAGOSITS, MICHAEL 7211 WILSON RD. WEST PALM BEACH, FL 33413 D () Delete | Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition |
| Name: Address: City-St-Zip: | JAGOSITS, MARIA 7211 WILSON RD. WEST PALM BEACH, FL 33413 | Name: Address: City-St-Zip: |
| Title: Name: Address: City-St-Zip: | D () Delete JAGOSITS, KRISTINA M 7211 WILSON RD. WEST PALM BEACH, FL 33413 | Title: () Change () Addition Name: Address: City-St-Zip: |
| Title: Name: Address: | D () Delete JAGOSITS, MICHAEL JR 7211 WILSON RD. | Title: () Change () Addition Name: Address: |

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.

City-St-Zip:

SIGNATURE: KRISTINA DERDA (JAGOSITS) D 01/21/2009

WEST PALM BEACH, FL 33413

City-St-Zip: