


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90204 023 ***150.00

DOCUMENT # P04000025035 1. Entity Name MEK SOLUTIONS, INC.																													
Principal Place of Business 3970 E. 10TH CT. HIALEAH, FL 33013				Mailing Address 3970 E. 10TH CT. HIALEAH, FL 33013																									
2. Principal Place of Business 5715 SUNSET DRIVE <small>Suite, Apt. #, etc.</small> UNIT #5713 <small>City & State</small> MIAMI, FL <small>Zip</small> 33143		3. Mailing Address 5715 SUNSET DRIVE <small>Suite, Apt. #, etc.</small> UNIT #5715 <small>City & State</small> MIAMI, FL <small>Zip</small> 33143		4. FEI Number 74-3115451 <small>Applied For</small> <input type="checkbox"/> \$8.75 Additional Fee Required																									
<small>Country</small> USA		<small>Country</small> USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent AHLERS, KLAUS B 3970 E. 10TH CT. HIALEAH, FL 33013				7. Name and Address of New Registered Agent <small>Name</small> <small>Street Address (P.O. Box Number is Not Acceptable)</small> <small>City</small> FL <small>Zip Code</small>																									
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 _____ (NOTE: Registered Agent signature required when reappointing) <small>Signature, typed or printed name of registered agent and title if applicable.</small> <small>DATE</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><small>TITLE</small></td> <td style="width: 65%;">D</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td><small>NAME</small></td> <td>BENDIKEN, KLAUS</td> <td></td> </tr> <tr> <td><small>STREET ADDRESS</small></td> <td>7210 SW 57TH AVENUE, 203</td> <td></td> </tr> <tr> <td><small>CITY - ST - ZIP</small></td> <td>MIAMI, FL 33143</td> <td></td> </tr> </table>			<small>TITLE</small>	D	<input type="checkbox"/> Delete	<small>NAME</small>	BENDIKEN, KLAUS		<small>STREET ADDRESS</small>	7210 SW 57TH AVENUE, 203		<small>CITY - ST - ZIP</small>	MIAMI, FL 33143		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><small>TITLE</small></td> <td style="width: 65%;"></td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td><small>NAME</small></td> <td></td> <td></td> </tr> <tr> <td><small>STREET ADDRESS</small></td> <td></td> <td></td> </tr> <tr> <td><small>CITY - ST - ZIP</small></td> <td></td> <td></td> </tr> </table>			<small>TITLE</small>		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<small>NAME</small>			<small>STREET ADDRESS</small>			<small>CITY - ST - ZIP</small>		
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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 with an address, with all other like empowered.

SIGNATURE: Klaus Bendiken - President **4/24/06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #