

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000068164

FILED  
Jan 20, 2009  
Secretary of State

**Entity Name:** THE MACKNIGHT SMOKE HOUSE, INC.

**Current Principal Place of Business:**

550 NE 185TH STREET  
MIAMI, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

10305 SABAL PALM AVE  
CORAL CABLES, FL 33156

**New Mailing Address:**

**FEI Number:** 20-1057545

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROWN, JONATHAN  
10305 SABAL PALM AVE  
CORAL CABLES, FL 33156 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: BROWN, JONATHAN S R  
Address: 10305 SABLE PALM AVE  
City-St-Zip: CORAL GABLES, FL 33156

Title: VP ( ) Delete  
Name: ROSE, STEPHEN  
Address: 2700 LAS VEGAS BLVD S, SUITE 3009  
City-St-Zip: LAS VEGAS, NV 89109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: ROSE, STEPHEN  
Address: 55 DREAMY HILL AVE  
City-St-Zip: NORTH LAS VEGAS, NV 89031

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:** STEPHEN ROSE

VP

01/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date