

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000137776

FILED
Feb 19, 2009
Secretary of State**Entity Name:** MK & FK MANAGEMENT INC**Current Principal Place of Business:**7200 INTERNATIONAL DR
SUITE 101
ORLANDO, FL 32819**New Principal Place of Business:****Current Mailing Address:**PO BOX 120941
CLERMONT, FL 34711**New Mailing Address:**27615 HWY 27
SUITE 112-204
LEESBURG, FL 34748**FEI Number:** 20-2246212**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BENEVIDES, PETE
14238 CORKWOOD LANE
ASTATULA, FL 34705 US**Name and Address of New Registered Agent:**PERKINS, HEATHER
27615 HWY 27
STE 112-204
LEESBURG, FL 34748 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: HEATHER PERKINS

02/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: BENEVIDES, PETE
Address: PO BOX 120941
City-St-Zip: CLERMONT, FL 34712**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: PERKINS, HEATHER
Address: 27615 HWY 27 STE 112-204
City-St-Zip: LEESBURG, FL 34748

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: HEATHER PERKINS

P

02/19/2009

Electronic Signature of Signing Officer or Director

Date