

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000160228

Entity Name: MKA CORPORATION #432, INC.

FILED
Jul 18, 2005
Secretary of State

Current Principal Place of Business:

680 E MAIN STREET
PAHOKEE, FL 33476

New Principal Place of Business:

Current Mailing Address:

680 E MAIN STREET
PAHOKEE, FL 33476

New Mailing Address:

FEI Number: 20-1928003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLMAN, ROBERT
1821 NE 146 ST
MIAMI, FL 33181 US

Name and Address of New Registered Agent:

MOHAMMED, MANIRUZZAMAN
680 E. MAIN STREET
PAHOKEE, FL 33476 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: MOHAMMED MANIRUZZAMAN

07/18/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,D () Delete
Name: KHALEQUZZAMAN, MOHAMMED
Address: 680 E MAIN ST
City-St-Zip: PAHOKEE, FL 33476

Title: VP,D () Delete
Name: MANIRUZZAMAN,
Address: 680 E MAIN ST
City-St-Zip: PAHOKEE, FL 33476

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SH () Change (X) Addition
Name: MOHAMMED, ALAMGIR
Address: 432 W. SUGARLAND HWY
City-St-Zip: CLEWISTON, FL 33440

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MOHAMMED MANIRUZZAMAN

VPD

07/18/2005

Electronic Signature of Signing Officer or Director

Date