

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

06 DEC 22 AM 11:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P05000166619

1. Entity Name  
MARKEV INVESTMENT CORPORATION



Principal Place of Business  
19901 NW 167TH CT.  
HIALEAH, FL 33015

Mailing Address  
19901 NW 167TH CT.  
HIALEAH, FL 33015

2. Principal Place of Business  
19901 NW 167TH CT

3. Mailing Address  
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Hialeah Fla 33015

City & State  
Hialeah Fla 33015

Zip Country

Zip Country



11222006 REIN-P CR2E098 (11/05) 06

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARRIS, STANLEY  
19901 NW 167TH CT.  
HIALEAH, FL 33015

19901 NW 167TH CT

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$750.00  
After January 1, 2007, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME HARRIS, STANLEY  
STREET ADDRESS 19901 NW 167TH CT.  
CITY-ST-ZIP HIALEAH, FL 33015

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
200082930852  
12/28/06--01045--015 \*\*150.00

TITLE VD  
NAME HARRIS, ANDRE  
STREET ADDRESS 2040 SHERMAN CIRCLE, #108  
CITY-ST-ZIP MIRAMAR, FL 33025

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
\$7222

TITLE SD  
NAME ROMAN, REINA  
STREET ADDRESS 2040 SHERMAN CIRCLE, #108  
CITY-ST-ZIP MIRAMAR, FL 33025

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

P05000166619 R  
MARKEV INVESTMENT CORPORATION  
STANLEY HARRIS  
2622 HALE AVENUE  
LOUISVILLE KY 40211

\$150.00

as per Telephone Conversation -  
att Mr Sean Jones

I never received any Annual Reports  
you mailed this to wrong address, 19901 NW 167th -  
is incorrect 19901 NW 67th Court  
Please Waive Fee + Inclosed is \$150.00 check  
as per Telephone Conversation

*[Signature]*