

# **2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000081058

Entity Name: THE MALKIN GROUP, INC.

**FILED**  
**Jun 02, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

803 INDIES DR  
RAMROD KEY, FL 33042

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 420963  
SUMMERLAND KEY, FL 33042

**New Mailing Address:**

FEI Number: 51-0587484

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MALKIN, BRUCE A  
803 INDIES RD  
RAMROD KEY, FL 33042 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

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: MALKIN, BRUCE A  
Address: P.O. BOX 420963  
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: DS ( ) Delete  
Name: BUSH, ALICE  
Address: P.O. BOX 42-0963  
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: VP ( ) Delete  
Name: ROQUE, RODOLFO C  
Address: 34 NERGANSER LANE - K W GOLF COURSE  
City-St-Zip: KEY WEST, FL 33040

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

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

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

Title: VP (X) Change ( ) Addition  
Name: SPISAK, PAUL  
Address: 701 SPANISH MAIN #618  
City-St-Zip: CUDJOE KEY, FL 33042

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: BRUCE MALKIN

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

PRES

06/02/2009

\_\_\_\_\_  
Date