

# 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000030494

Entity Name: M & K WIRELESS, INC.

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

1628 LAKE TRAFFORD RD.  
IMMOKALEE, FL 34142 US

## New Principal Place of Business:

## Current Mailing Address:

11600 S.CLEVELAND AVE  
FORT MYERS, FL 33907 US

## New Mailing Address:

3289 CLEVELAND AVE  
FORT MYERS, FL 33901 US

FEI Number: 26-2243788

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AMES, ANDREW T CPA  
128 W. OAK STREET  
ARCADIA, FL 34266 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: P ( ) Delete  
Name: KAWASMY, MURSI S  
Address: 11600 S. CLEVELAND AV.  
City-St-Zip: FORT MYERS, FL 33907 US

Title: VP ( ) Delete  
Name: ABUIJAQ, KHALED  
Address: 1628 LAKE TRAFFORD RD.  
City-St-Zip: IMMOKALEE, FL 34142 US

Title: T ( ) Delete  
Name: KAWASMY, MURSI S  
Address: 11600 S. CLEVELAND AV.  
City-St-Zip: FORT MYERS, FL 33907

Title: S ( ) Delete  
Name: ABUIJAQ, KHALED  
Address: 1628 LAKE TRAFFORD RD.  
City-St-Zip: IMMOKALEE, FL 34142 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ABUIJAQ, KHALED  
Address: 1628 LAKE TRAFFORD RD.  
City-St-Zip: IMMOKALEE, FL 34142 US

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

Title: T (X) Change ( ) Addition  
Name: ABDEL-QADER, FARID  
Address: 3289 CLEVELAND AVE  
City-St-Zip: FORT MYERS, FL 33901

Title: S (X) Change ( ) Addition  
Name: ABDEL-QADER, FARID  
Address: 3289 CLEVELAND AVE  
City-St-Zip: FORT MYERS, FL 33901 US

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: KHALED ABUIJAQ

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date