

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P94000002984

Entity Name: M.K. ROLLAND, INC.

**FILED**  
**Dec 04, 2007**  
**Secretary of State**

## **Current Principal Place of Business:**

7601 E. TREASURE DRIVE  
S #9  
NORTH BAY VILLAGE, FL 33141

## **Current Mailing Address:**

7601 E. TREASURE DRIVE  
S #9  
NORTH BAY VILLAGE, FL 33141

## **New Principal Place of Business:**

7601 E. TREASURE DRIVE (305)-303-2028  
S #9  
NORTH BAY VILLAGE, FL 33141

## **New Mailing Address:**

FEI Number: 65-0462266

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ADAN, ALBERT  
7601 E. TREASURE DRIVE  
S #9  
NORTH BAY VILLAGE, FL 33141 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: ADAN, ALBERT  
Address: 991 SW 101 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP ( ) Delete  
Name: ANNESE, SALVATORE D  
Address: 632 N.E. 151 STREET  
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: S ( ) Delete  
Name: CARPMAN, IRVING  
Address: 20533 BISCAYNE BLVD., APT. N-144  
City-St-Zip: AVENTURA, FL 33180

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

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

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

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

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: ADAN, ALBERT

P

12/04/2007

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

\_\_\_\_\_  
Date