2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug 08, 2005 8:00 am Secretary of State DOCUMENT # P98000069186 08-08-2005 90049 013 ***150.00 FIRST MK CORPORATION Principal Place of Business Mailing Address - ~ ~ ~ ~ ~ ~ ~ U **6700 CENTRAL AVENUE 6700 CENTRAL AVENUE** ST PETERSBURG, FL 33710 ST PETERSBURG, FL 33710 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06282005 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-3526412 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHARMA, KRISHNA Street Address (P.O. Box Number is Not Acceptable) 1819 ALICIA WAY CLEARWATER, FL 33764 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. anna Signature, typed or printed name of registered agent and tale if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Due by September 7, 2005 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. PST TITI F ☐ Detete TITLE ☐ Change ■ Addition Mc Donald, Brent 701 Island Way NAME SHARMA, KRISHNA NAME STREET ADDRESS 1819 ALICIA WAY STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33764 CITY-ST-ZIP Clear water Béac THILE ☐ Delete TITLE NAME MILCHAN, ESTER NAME STREET ADDRESS 6600 SUNSET WAY UNIT 307 STREET ADDRESS CITY-ST-7IP ST PETE BEACH, FL 33706 CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition NAME STEWART, GEOFFREY NAME STREET ADDRESS 307 161 AVE STREET ADDRESS CITY-ST-ZIP REDINGTON BEACH, FL 33708 CITY-ST-ZIP Defete ___ Addition TITLE TITLE ☐ Change NAME REMINGTON, CARL NAME STREET ADDRESS 6600 SUNSET WAY UNIT 121 STREET ADDRESS CITY-ST-ZIP ST PETE BEACH, FL 33706 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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.

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RE Document # P98000069186 To Whom It May Concern,

Dear Sir!
This is to inform you that we did
not receive the first renewal notice. Therefore
we did not send in the anual fee of \$150,00
Since speaking to a representative about
this \$14/05 he allowed that we could send
\$150.00 at this time
We would have sent the amount in
earlier had we received the initial notice
Thank you for your consideration

Enclosed is the check made payable to Floreda Department of State for \$150.00 as instructed,

Sincerely,

Krishua Shama 8/5/05

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