

2004 FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2004 8:00 am
Secretary of State

03-12-2004 90045 028 ***150.00

DOCUMENT # P99000006898

1. Entity Name

MKA, INC.



Principal Place of Business

121 CARISBROOKE STREET
OCOE FL 34761

Mailing Address

121 CARISBROOKE STREET
OCOE FL 34761

2. Principal Place of Business

13718 Glynshel Dr.

3. Mailing Address

13718 Glynshel Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

WINTER GARDEN FL

City & State

WINTER GARDEN FL

4. FEI Number

59-3554415

Applied For

Not Applicable

Zip

Country

34787

ORANGE

Zip

Country

34787

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCCOURT, MARY-LYNN
121 CARISBROOKE ST
OCOE FL 34761

7. Name and Address of New Registered Agent

Name

MCCOURT, MARY-LYNN

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

13718 Glynshel Dr.

City

WINTER GARDEN

FL

Zip Code

34787

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

MARY-LYNN MCCOURT

MARY-LYNN MCCOURT

2/12/04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PT ☐ Delete
NAME MCCOURT, MARY-LYNN
STREET ADDRESS 121 CARISBROOKE STREET
CITY-ST-ZIP OCOEE FL 34761

TITLE VPS ☐ Delete
NAME MCCOURT, MICHAEL
STREET ADDRESS 121 CARISBROOKE ST
CITY-ST-ZIP OCOEE FL 34761

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PT ☒ Change ☐ Addition
NAME MCCOURT, MARY-LYNN
STREET ADDRESS 13718 Glynshel Dr.
CITY-ST-ZIP WINTER GARDEN, FL 34787

TITLE VPS ☒ Change ☐ Addition
NAME MCCOURT, MICHAEL
STREET ADDRESS 13718 Glynshel Dr.
CITY-ST-ZIP WINTER GARDEN, FL 34787

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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.

SIGNATURE:

MARY-LYNN MCCOURT MARY-LYNN MCCOURT 2/12/04 877-0298

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #