

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000089353

1. Entity Name
SMK EXPORT, INC.



Principal Place of Business
18151 NE 31ST CT., APT 1001
AVENTURA, FL 33160-2600

Mailing Address
18151 NE 31ST CT., APT 1001
AVENTURA, FL 33160-2600

DO NOT WRITE IN THIS SPACE

40075969



04142007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0959713	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

6. Name and Address of Current Registered Agent
PITCHON, MOISES
18151 NE 31ST., APT 1001
AVENTURA, FL 33160-2600

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IN THIS SPACE**

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 _____
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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D
NAME KURBANALI, STEVEN C
STREET ADDRESS 7090 NW 177 ST., APT 204
CITY-ST-ZIP HIALEAH, FL 33015

TITLE D
NAME KURBANALI, MERLE
STREET ADDRESS 7090 NW 177 ST., APT 204
CITY-ST-ZIP HIALEAH, FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Clarity Pres.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/07 3059329710
Date Daytime Phone #