2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000089353

Entity Name: SMK EXPORT, INC.

FILED Jan 28, 2008 Secretary of State

Littly Nai	IIIe. SIVIR EAF	ORT, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
18151 NE AVENTUR	31ST CT., AP ⁻ RA, FL 331602	Г 1001 600		18151 NE 31ST CT., #1001 AVENTURA, FL 331602600	
Current M	lailing Addres	s:	New Mailing Addres	New Mailing Address:	
18151 NE 31ST CT., APT 1001 AVENTURA, FL 331602600			18151 NE 31ST CT, AVENTURA, FL 331	18151 NE 31ST CT, #1001 AVENTURA, FL 331602600	
FEI Number	: 65-0959713	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
PITCHON, 18151 NE AVENTUR	, MOISES 31ST., APT 10 RA, FL 331602	01 600 US	PITCHON, MOISES 18151 NE 31ST, #10 AVENTURA, FL 331	PITCHON, MOISES 18151 NE 31ST, #1001 AVENTURA, FL 331602600 US	
	named entity : e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,	
SIGNATURE:				01/28/2008	
	Electror	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () KURBANALI, S' 7090 NW 177 S HIALEAH, FL 3	ST., APT 204	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () KURBANALI, M 7090 NW 177 S HIALEAH, FL 3	ST., APT 204	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MOISES PITCHON P 01/28/2008