

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K78165

**Entity Name:** MATKIM INDUSTRIES, INC.

**Current Principal Place of Business:**

3001 NORTHWEST 60TH STREET  
FT. LAUDERDALE, FL 33309

**Current Mailing Address:**

P.O. BOX 168  
OXFORD, MA 01540

**FEI Number:** 65-0115624

**Certificate of Status Desired:** No

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

CORPWIZ REGISTERED AGENTS, INC  
8750 NW 36 STREET  
SUITE 425  
MIAMI, FL 33178 US

*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

**Officer/Director Detail :**

Title PD  
Name SHENKER, MATTHEW  
Address 2 HAWKSLEY DRIVE  
City-State-Zip: OXFORD MA 01540

Title D  
Name ROWLAND, PAUL  
Address 2 HAWKSLEY DR., P.O. BOX 168  
City-State-Zip: OXFORD MA 01540

Title S  
Name BUTMAN, CHARLES  
Address 3001 NORTHWEST 60TH STREET  
City-State-Zip: FT. LAUDERDALE FL 33309

Title D  
Name WISE, PETER  
Address 2 HAWKSLEY DRIVE, PO BOX 168  
City-State-Zip: OXFORD MA 01540

*I hereby 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 all other like empowered.*

**SIGNATURE:** MATTHEW SHENKER

**PRESIDENT**

**04/09/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date