

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002963

FILED
Jan 03, 2007
Secretary of State

Entity Name: MULTI-BANK SERVICES, LTD. COMPANY

Current Principal Place of Business:

24280 WOODWARD
PLEASANT RIDGE, MI 48069

New Principal Place of Business:

Current Mailing Address:

24280 WOODWARD
PLEASANT RIDGE, MI 48069

New Mailing Address:

FEI Number: 38-2584711 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DREWS, MICHAEL W
2400 E. COMMERCIAL BLVD., #812
FT. LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: MACCAGNONE, JEFFREY
Address: 925 THREE MILE ROAD
City-St-Zip: GROSSE POINTE PARK, MI 48230

Title: DT () Delete
Name: DREWS, MICHAEL W
Address: 434 NE 9TH ST.
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: SINGH, RANJIT
Address: 1 KOZHEVNITCHESKY PROEZD
City-St-Zip: MOSCOW, RU 115114

Title: PDC () Delete
Name: MACCAGNONE, DAVID T
Address: 434 NE 9TH ST.
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID T. MACCAGNONE

CEO

01/03/2007

Electronic Signature of Signing Officer or Director

_____ Date