

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000108003

Entity Name: MASS BROTHERS, INC.

FILED  
Jan 07, 2010  
Secretary of State

**Current Principal Place of Business:**

C/O MORTON PLANT HOSPITAL  
8787 BRYAN DAIRY ROAD  
LARGO, FL 33777

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MORTON PLANT HOSPITAL  
8787 BRYAN DAIRY ROAD  
LARGO, FL 33777

**New Mailing Address:**

FEI Number: 20-1394498

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FACKIH, MAJED N DR.  
6996 DUNCANSBY AVENUE N  
ST PETERSBURG, FL 33709 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: P  
Name: FACKIH, AHLAM  
Address: 6996 DUNCANSBY AVENUE N  
City-St-Zip: ST PETERSBURG, FL 33709

Title: VP  
Name: FACKIH, NADER  
Address: 6996 DUNCANSBY AVENUE N  
City-St-Zip: ST PETERSBURG, FL 33709

Title: S  
Name: FACKIH, MAJED N DR  
Address: 6996 DUNCANSBY AVENUE N  
City-St-Zip: ST PETERSBURG, FL 33709

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: AHLAM FACKIH

P

01/07/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date