

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000112984

FILED
Apr 11, 2006
Secretary of State

Entity Name: MACH V, INC.

Current Principal Place of Business:

P.O. BOX 142055
CORAL GABLES, FL 33114 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 142055
CORAL GABLES, FL 33114 US

New Mailing Address:

FEI Number: 20-1990734 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACHADO, CARLOS M
101 MADEIRA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MACHADO, CARLOS M
2030 DOUGLAS ROAD
SUITE 210
CORAL GABLES, FL 33134 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: CARLOS M. MACHADO 04/11/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: MACHADO, CARLOS M
Address: 1409 URBINO AVENUE
City-St-Zip: CORAL GABLES, FL 33146 US

Title: VT () Delete
Name: MACHADO, EMILIA C
Address: 4800 RIVIERA DRIVE
City-St-Zip: CORAL GABLES, FL 33146 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CARLOS M. MACHADO P 04/11/2006

Electronic Signature of Signing Officer or Director Date