

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000065407

FILED
Apr 05, 2006
Secretary of State

Entity Name: M.B.S. GIFTS, INC.

Current Principal Place of Business:

6 W LEMON ST
BEVERLY HILLS, FL 34465

New Principal Place of Business:

Current Mailing Address:

6 W LEMON ST
BEVERLY HILLS, FL 34465

New Mailing Address:

FEI Number: 86-1136248 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUTKIEWICZ, LISA
6 W LEMON ST
BEVERLY HILLS, FL 34465 US

Name and Address of New Registered Agent:

COGNATO, MAGDALENA
6 W LEMON ST
BEVERLY HILLS, FL 34465 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: MAGDALENA COGNATO 04/05/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: COGNATO, MAGDALENA
Address: 4760 N BAYWOOD DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D () Delete
Name: COGNATO, MAGDALENA
Address: 4760 N BAYWOOD DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: DCFO (X) Delete
Name: DUTKIEWICZ, LISA
Address: 24100 SW BEAVER DR
City-St-Zip: DUNNELLON, FL 34431

Title: P (X) Delete
Name: DUTKIEWICZ, LISA
Address: 24100 SW BEAVER DR
City-St-Zip: DUNNELLON, FL 34431

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: MAGDALENA COGNATO DCEO 04/05/2006

Electronic Signature of Signing Officer or Director Date