

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000107629

Entity Name: M P D B, CHARTERED

FILED  
Apr 28, 2005  
Secretary of State

**Current Principal Place of Business:**

707 SE THIRD AVENUE  
SUITE 400  
FT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

707 SE THIRD AVENUE  
SUITE 400  
FT LAUDERDALE, FL 33316

**New Mailing Address:**

FEI Number: 65-0988615      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DISQUE, PHILIPP A  
707 SE THIRD AVENUE  
SUITE 400  
FT LAUDERDALE, FL 33316 US

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

DISQUE, PHILIP A  
707 SE THIRD AVENUE  
SUITE 400  
FT LAUDERDALE, FL 33316 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: PHILIP A DISQUE      04/28/2005  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: POWERS, RAYMOND J  
Address: 707 SE THIRD AVE SUITE 400  
City-St-Zip: FT LAUDERDALE, FL 33316

Title: D      ( ) Delete  
Name: DISQUE, PHILIP A  
Address: 707 SE THIRD AVE SUITE 400  
City-St-Zip: FT LAUDERDALE, FL 33316

Title: D      ( ) Delete  
Name: MACHEN, JIM  
Address: 301 W CAMINO GARDENS BLVD STE 101  
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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RAYMOND J POWERS      PD      04/28/2005  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date