

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Aug 25, 2009
Secretary of State**

DOCUMENT# V04777

Entity Name: MAINGATE HILLS, INC.

Current Principal Place of Business:

1110 BRICKELL AVENUE, SUITE 310
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1110 BRICKELL AVENUE, SUITE 310
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-0311614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NS CORPORATE SERVICES INC.
1110 BRICKELL AVENUE, SUITE 310
MIAMI, FL 33131 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

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: GUTIERREZ, SARA M
Address: 1110 BRICKELL AVENUE, SUITE 310
City-St-Zip: MIAMI, FL 33131

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: SEVERO, ZANZIBAR
Address: 1110 BRICKELL AVENUE, SUITE 310
City-St-Zip: MIAMI, FL 33131

Title: VPT () Change (X) Addition
Name: SEVERO, MARA MARIA DA SILVA
Address: 1110 BRICKELL AVENUE, SUITE 310
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify 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: SEVERO

D

08/25/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date