2008 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 11, 2008 8:00 am **DOCUMENT # 448493 Secretary of State** 1. Entity Name MGR CORP. 01-11-2008 90035 001 ***150.00 Principal Place of Business Mailing Address 5625 JOHNSON STREET 5625 JOHNSON STREET HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042008 CR2E034 (12/06) City & State City & State Applied For 4. FEI Number 59-1577890 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RUBINSTEIN, MICHELL G Street Address (P.O. Box Number is Not Acceptable) 5625 JOHNSON STREET HOLLYWOOD, FL 33021 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Rogistored Agant signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be П After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. S/T TITLE TITLE Delete ☐ Change ☐ Addition NAME RUBINSTEIN, MICHELL G NAME STREET ADDRESS 5625 JOHNSON STREET STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-7IP TITLE D Change ☐ Defete TITLE Addition DENISE RUBINGTEIN 5695 JOHNSON ST NAME RUBINSTEIN, DENISE NAME STREET ADDRESS 5625 JOHNSON STREET STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY - ST - ZIP HOllywood, FL 33021 P TITLE TITLE Delete ☐ Change ☐ Addition DONALD, DUNN NAME NAME STREET ADDRESS 5625 JOHNSON STREET STREET ADORESS CITY - ST - ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE HILE ☐ Change ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELL G. RUBINSTEIN June G. Justice 500 1 8 08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dave Dayletin Phone F