

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002249

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: MEI DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

11772 WEST SAMPLE RD  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

11772 WEST SAMPLE RD  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 65-0797363

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BALTZER, GORDON  
1172 WEST SAMPLE RD  
CORAL SPRINGS, FL 33065 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MOTI, SAM  
Address: 280 MIRABEAU PLACE  
City-St-Zip: GROSSE POINTE FARMS, MI 48236

Title: VST ( ) Delete  
Name: BALTZER, GORDON  
Address: 11772 WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

**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 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: GORDON B BALTZER

VST

01/14/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date