2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005650

City-St-Zip:

CHESTER, CH CH12AU UK

FILED Mar 25, 2009 Secretary of State

Entity Name: MCSPORT GROUP LIMITED CO.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	_AS STREET ,, CH CH12 AU	UK			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	_AS STREET ,, CH CH12 AU	UK			
FEI Number:		FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
WHITE, CHRISTOPHER A ESQ 240 PONTE VEDRA PARK DRIVE SUITE 150 PONTE VEDRA BEACH, FL 32082 US			4230 PÄBLO PROFES SUITE 200	WHITE, CHRISTOPHER A ESQ 4230 PABLO PROFESSIONAL COURT SUITE 200 JACKSONVILLE, FL 32224 US	
The above in the State		bmits this statement for the pu	rpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: CHRISTOPHER A WHITE, ESQUIRE				03/25/2009	
	Electronic	Signature of Registered Ager	nt	Date	
Election Can	npaign Financing T	rust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () D CHEETHAM, ROB 24 NICHOLAS ST CHESTER, CH C	ERT REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VC () D LANGAN, TERENO 24 NICHOLAS ST CHESTER, CH C	CE P REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () D CUTHBERTSON, 24 NICHOLAS ST	ROBERT I	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: ROBERT CHEETHAM С 03/25/2009