

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000006137

Entity Name: MBR2, INC.

FILED  
Oct 15, 2009  
Secretary of State

**Current Principal Place of Business:**

1768 STATE AVE  
HOLLY HILL, FL 32117

**New Principal Place of Business:**

**Current Mailing Address:**

8758 HELLMAN AVE  
RANCHO CUCAMONGA, CA 91730

**New Mailing Address:**

FEI Number: 20-5558458

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR SUITE 4  
WESTON, FL 33331 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: STEVEN MANCHESTER

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: ROBERTS, BOB  
Address: 8758 HELLMAN AVE  
City-St-Zip: RANCHO CUCAMONGA, CA 91730

Title: DVS ( ) Delete  
Name: MANCHESTER, STEVE  
Address: 8758 HELLMAN AVE  
City-St-Zip: RANCHO CUCAMONGA, CA 91730

Title: D ( ) Delete  
Name: BARBEE, BILL  
Address: 1 WEST CHURCH ST  
City-St-Zip: CARTERSVILLE, GA 30120

**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 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: STEVEN MANCHESTER

Electronic Signature of Signing Officer or Director

DVS

10/15/2009

Date