


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 8:00 am
Secretary of State

05-05-2008 90234 042 ***150.00

DOCUMENT # F08000000009

1. Entity Name
MARK IV GLOBAL HOLDING CORP.



Principal Place of Business
**501 JOHN JAMES AUDUBON PKWY.
 AMHERST, NY 14228**

Mailing Address
**501 JOHN JAMES AUDUBON PKWY.
 AMHERST, NY 14228**

40096283



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

04152008 Chg-P CR2E034 (12/06)

City & State

4. FEI Number
26-1448419

Applied For
 Not Applicable

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	MONTAGUE, WILLIAM	
STREET ADDRESS	501 JOHN JAMES AUDUBON PKWY.	
CITY-ST-ZIP	AMHERST, NY 14228	
TITLE	D	<input type="checkbox"/> Delete
NAME	TAYLOR, THOMAS V JR.	
STREET ADDRESS	5200 TOWN CENTER CIR., SUITE 600	
CITY-ST-ZIP	BOCA RATON, FL 33486	
TITLE	VT	<input type="checkbox"/> Delete
NAME	BARBERIO, MARK	
STREET ADDRESS	501 JOHN JAMES AUDUBON PKWY.	
CITY-ST-ZIP	AMHERST, NY 14228	
TITLE	S ^{VP}	<input type="checkbox"/> Delete
NAME	STEELE, EDWARD	
STREET ADDRESS	501 JOHN JAMES AUDUBON PKWY.	
CITY-ST-ZIP	AMHERST, NY 14228	
TITLE	D	<input type="checkbox"/> Delete
NAME	WERKING, DOUG	
STREET ADDRESS	5200 TOWN CENTER CIR., SUITE 600	
CITY-ST-ZIP	BOCA RATON, FL 33486	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP and CAO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Richard L. Wendt's	
STREET ADDRESS	501 J Audubon Pkwy	
CITY-ST-ZIP	Amherst, NY 14228	

12. I hereby certify that the information supplied with this filing 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 empowerments.

SIGNATURE: Edward R Steele 4/29/08 (714) 689-4972

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #