2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004249

Entity Name: MBO BINDER & CO. OF AMERICA

FILED Mar 02, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
400 HIGHL WESTAMF	AND AVE. PTON, NJ 086	060			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
400 HIGHL WESTAMF	AND AVE. PTON, NJ 086	060			
FEI Number:	36-3249541	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
1200 SOUT	ORATION SY TH PINE ISLA ON, FL 3332	ND ROAD			
	named entity of Florida.	submits this statement for the	purpose of changing its registe	red office or registered agent, or both,	
SIGNATURE:					
	Electro	nic Signature of Registered Ag	ent	Date	
Election Can	npaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CONSTON, HE 100 HARBOR\) Delete :NRY S /IEW DRIVE, APT 405 NGTON, NY 11050	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (HEINISCH, RE 400 HIGHLANI WESTAMPTOI	DAVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (BECKBISSING 20409 SAN RA BOCA RATON	FAEL CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GRUBER, BEF 115 BELLA VI		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MANFRED, MI GRABEN STR		Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: REINHARD HEINISCH TREA 03/02/2009