

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G20934

Entity Name: MADSON, INC.

FILED
Mar 02, 2006
Secretary of State

Current Principal Place of Business:

9791 NW 115 WAY
MEDLEY, FL 33178

New Principal Place of Business:

Current Mailing Address:

9791 NW 115 WAY
MEDLEY, FL 33178

New Mailing Address:

FEI Number: 59-2262023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADERAL, JUAN
8111 SW 203RD STREET
MIAMI, FL 33189 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: MADERAL, JUAN
Address: 8111 SW 203 ST
City-St-Zip: MIAMI, FL 33189

Title: V () Delete
Name: MADERAL, FRANCISCO
Address: 3040 NW 3RD ST.
City-St-Zip: MIAMI, FL 33125

Title: ST () Delete
Name: MADERAL, STACY
Address: 8111 SW 203 ST
City-St-Zip: MIAMI, FL 33189

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 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: STACY MADERAL

ST

03/02/2006

Electronic Signature of Signing Officer or Director

Date