2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K76682

Entity Name: M.D.P. CORP.

FILED Apr 22, 2009 Secretary of State

C/O M.D.P. EVANS ASSOC. 1360 NE 138TH STREET N. MIAMI, FL 33161 US

Current Mailing Address: New Mailing Address:

P.O. BOX 610872 N. MIAMI, FL 33261 US

FEI Number: 59-2946695 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:

EVANS, DIANA 1471 SOUTHWIND DR CASSELBERRY, FL 32707 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: SD (X) Change () Addition

 Name:
 EVANS, MAE R.
 Name:
 EVANS, MAE R.

 Address:
 1360 NE 138 STREET
 Address:
 1360 NE 138 STREET

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL

Title: D () Delete Title: PD (X) Change () Addition

Name: EVANS, PAMELA Name: EVANS, PAMELA

Address: 2750 NE 183RD STREET Address: 2750 NE 183RD STREET #2310

City-St-Zip: AVENTURA, FL City-St-Zip: AVENTURA, FL

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: PAMELA EVANS PD 04/22/2009