2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000115632

Entity Name: MBF FUSION LLC

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

318 INDIAN TRACE 2201 S.W. 145TH AVE 291 207

SUNRISE, FL 33326 MIRAMAR, FL 33027

Current Mailing Address: New Mailing Address:

318 INDIAN TRACE 2201 S.W. 145TH AVE 291 207 SUNRISE, FL 33326 MIRAMAR, FL 33027

FEI Number: 20-3880292 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:

CHACON, PABLO
318 INDIAN TRACE
291
WESTON, FL 33326 US
CHACON, PABLO
2201 S.W. 145TH AVE.
207
MIRAMAR, FL 33027 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: PABLO CHACON 04/25/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title:MGRM () DeleteTitle:MGRM (X) Change () AdditionName:BARAJAS, BELKISName:CHACON, PABLOAddress:302 E RIVERBEND DRAddress:2201 S.W. 145TH AVE SUITE 207

City-St-Zip: SUNRISE, FL 33326 City-St-Zip: MIRAMAR, FL 33027

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 CHACON, PABLO
 Name:

 Address:
 302 E RIVERBEND DR
 Address:

 City-St-Zip:
 SUNRISE, FL 33326
 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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PABLO CHACON MGRM 04/25/2008