

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M01050

Entity Name: MALU ENTERPRISES, INC.

FILED
Feb 27, 2008
Secretary of State

Current Principal Place of Business:

3250 NW 86TH STREET
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

3250 NW 86TH STREET
MIAMI, FL 33147

New Mailing Address:

P.O. BOX 2333
MIAMI, FL 33144

FEI Number: 59-2426998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALDANAS, NEMROD M
9439 FONTAINE BLEAU BLVD
#103
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

SALDANAS, NEMROD M PTD
9439 FONTAINE BLEAU BLVD
#103
MIAMI, FL 33144 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: NEMROD M. SALDANAS

02/27/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: SALDANAS, NEMROD M PTD
Address: 9439 FONTAINEBLEAU BLVD #103
City-St-Zip: MIAMI, FL 33144

Title: SD () Delete
Name: SALDANAS, LUSSY SD
Address: 13700 SW 62ND ST #107
City-St-Zip: MIAMI, FL 33183

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: SALDANAS, NEMROD M MR.
Address: 9439 FONTAINEBLEAU BLVD #103
City-St-Zip: MIAMI, FL 33144

Title: SD (X) Change () Addition
Name: SALDANAS, LUSSY MRS,
Address: 13700 SW 62ND ST #107
City-St-Zip: MIAMI, FL 33183

Title: VPTD () Change (X) Addition
Name: SALDANAS, CARLOS E MR.
Address: 13700 SW 62 ST. # 107
City-St-Zip: MIAMI, FL 33183

Title: VSD () Change (X) Addition
Name: SALDANAS, MANUEL J MR.
Address: 840 WALLACE ST.,
City-St-Zip: CORAL GABLE, FL 33134

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: NEMROD M. SALDANAS

PTD

02/27/2008

Electronic Signature of Signing Officer or Director

Date