2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002831

FILED Feb 08, 2007 Secretary of State

Entity Name: MEGA VISION COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	196TH STREE RDENS, FL 3:				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
2759 NW 196TH STREET MIAMI GARDENS, FL 33056					
FEI Number:	20-2553796	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
2759 NW 1 MIAMI GAF The above	TIFPHANIE I 196TH STREE RDENS, FL 3: named entity e of Florida.	3056 US	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATUF		nic Signature of Registered Age	nt	 Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (CLARKE, PETI 2759 NW 196T MIAMI GARDE	H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (BRYANT, DON 2759 NW 196T MIAMI GARDE	H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (HEPBURN, VE 2759 NW 196T MIAMI GARDE	'H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (DAUGHTREY, 2759 NW 196T MIAMI GARDE	'H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (TUCKER, TIFP 2759 NW 196T MIAMI GARDE	H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIFPHANIE I TUCKER D 02/08/2007