

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009698

FILED
Jan 23, 2007
Secretary of State

Entity Name: MPPA - INC.

Current Principal Place of Business:

10471 NW 21 CT.
SUNRISE, FL 33322

New Principal Place of Business:

Current Mailing Address:

10471 NW 21 CT.
SUNRISE, FL 33322

New Mailing Address:

FEI Number: 65-0317440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOODY, DONALD
10471 NW 21 CT.
SUNRISE, FL 33322 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOODY, DONALD
Address: 10471 NW 21 CT.
City-St-Zip: SUNRISE, FL 33322

Title: D () Delete
Name: PERDUE, JIM
Address: 395 NW 89 LN.
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: KRUSZESKI, MARCEL
Address: 8341 NW 54 CT.
City-St-Zip: FT. LAUDERDALE, FL 33351

Title: D () Delete
Name: BRADLEY, LINDWELL
Address: 5333 NW 89 AVE.
City-St-Zip: SUNRISE, FL 33351

Title: D () Delete
Name: LOGAN, JOHN R
Address: 1951 BAYBERRY DRIVE
City-St-Zip: PEMBROKE PINES, FL 33024 US

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:

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

SIGNATURE: JOHN R LOGAN

D

01/23/2007

Electronic Signature of Signing Officer or Director

Date