

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011962

FILED  
Apr 09, 2007  
Secretary of State

Entity Name: MDT NETWORK INC.

## Current Principal Place of Business:

9220 SW 158TH LANE  
MIAMI, FL 33177

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 771225  
MIAMI, FL 33177

## New Mailing Address:

FEI Number: 14-1962861

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORTIELLA, IVETTE  
3964 NE 15 STREET  
HOMESTEAD, FL 33033 US

## Name and Address of New Registered Agent:

CORTIELLA, IVETTE  
9220 SW 158TH LANE  
MIAMI, FL 33157 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: IVETTECORTIELLA

04/09/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CORTIELLA, IVETTE  
Address: 3964 NE 15 STREET  
City-St-Zip: HOMESTEAD, FL 33033

Title: S ( ) Delete  
Name: LUGO, KARINA  
Address: 3964 NE 15 STREET  
City-St-Zip: HOMESTEAD, FL 33033

Title: T ( ) Delete  
Name: SANBORN, SEAN  
Address: 3964 NE 15 STREET  
City-St-Zip: HOMESTEAD, FL 33033

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CORTIELLA, IVETTE  
Address: 9220 SW 158TH LANE  
City-St-Zip: MIAMI, FL 33157

Title: S (X) Change ( ) Addition  
Name: LUGO, KARINA  
Address: 12225 SW 151ST STREET  
City-St-Zip: MIAMI # I-109, FL 33186

Title: T (X) Change ( ) Addition  
Name: MARIA, ARCACHA  
Address: 12225 SW 151ST STREET  
City-St-Zip: MIAMI # I-109, FL 33186

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: IVETTECORTIELLA

PD

04/09/2007

Electronic Signature of Signing Officer or Director

Date