2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004320

City-St-Zip:

ORLANDO, FL 32822

Entity Name: M & P VIRTUAL ENTERPRISE, INC

FILED Apr 21, 2008 Secretary of State

Current Principal Place of Rusiness			Now Principal Place	New Principal Place of Business:	
Current Principal Place of Business:			New Fillicipal Flace	e Of Busilless.	
	FLAGS BLVD				
1132 ORLANDO	D, FL 32822				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
5758 FIVE	FLAGS BLVD				
1132					
ORLANDO	D, FL 32822				
FEI Number	: 20-8890751	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
1065 REG 309	EZ, PAOLA AL POINTE TE RY, FL 32746				
	named entity : e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	QUASH, MARV	GS BLVD 1132	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GONZALES, PA	OINTE TERRACE 309	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () QUASH, JANIE 5758 FIVE FLA ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () QUASH, MARS 10151 UNIVER ORLANDO, FL	SITY BLVD 160	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VP (X SMITH, LATASI 5758 FIVE FLA		Title: Name: Address:	() Change () Addition	

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

City-St-Zip:

SIGNATURE: MARVA A. QUASH CEO 04/21/2008