

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008354

FILED
Apr 30, 2009
Secretary of State

Entity Name: MS VIEWS AND RELATED NEWS, INC.

Current Principal Place of Business:

777 NW 72ND AVENUE
SUITE 3005
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

8669 SW 51 STREET
COOPER CITY, FL 333284301

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAIG M. DORNE, PA
407 LINCOLN ROAD
PENTHOUSE SOUTHEAST
MIAMI BEACH, FL 33139 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: SCHLOSSMAN, STUART
Address: 777 NW 72ND AVENUE
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: BLONDET, AMAURY
Address: 777 NW 72ND AVENUE
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: BENITEZ, CARMEN
Address: 777 NW 72ND AVENUE
City-St-Zip: MIAMI, FL 33126

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:

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.

SIGNATURE: STUART SCHLOSSMAN

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date