

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008 8:00 am
Secretary of State

01-09-2008 90010 032 ****70.00

DOCUMENT # N44100			
1. Entity Name M.B.P.D. RETIREES CORP.			
Principal Place of Business 999 - 11TH STREET MIAMI BEACH, FL 33139		Mailing Address 5701 S.W. 134 AVENUE SOUTHWEST RANCHES, FL 33330 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
01072008		Chg-NP CR2E037 (12/06)	
4. FEI Number 65-0352549		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BASLER, JOSEPH F 914 W 66 STREET HIALEAH, FL 33012		Name <i>Charles Seraydar</i> Street Address (P.O. Box Number is Not Acceptable) <i>5701 SW 134 Ave</i> City <i>Southwest Ranches FL</i> Zip Code <i>33330</i>	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <i>Charles Seraydar</i>		SIGNATURE <i>Charles Seraydar</i> DATE <i>1/7/2008</i>	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD	BROWNLOW, JOSEPH <input checked="" type="checkbox"/> Delete	TITLE PD	<i>William O'Neil</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	5301 SW 145 AVENUE	NAME	<i>2551 NW 103 Ave #405</i>
STREET ADDRESS	FORT LAUDERDALE, FL 33330	STREET ADDRESS	<i>SUNRISE, FL, 33322</i>
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE VP	VESKI, LYNDIA <input type="checkbox"/> Delete	TITLE	
NAME	3350 S.W. 131 TERRACE	NAME	
STREET ADDRESS	DAVIE, FL 33330	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE TD	SERAYDAR, CHARLES <input type="checkbox"/> Delete	TITLE	
NAME	5701 S.W. 134 AVENUE	NAME	
STREET ADDRESS	SOUTHWEST RANCHES, FL 33330	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	<i>SD</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	<i>VINCENT APRITE</i>
STREET ADDRESS		STREET ADDRESS	<i>999 11st,</i>
CITY-ST-ZIP		CITY-ST-ZIP	<i>MIAMI BEACH, FL, 33139</i>
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Charles Seraydar</i>		Date <i>1/7/2008</i> Daytime Phone # <i>305-725-7935</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	