2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000017851

Entity Name: MPN HOLDINGS, INC.

Address:

City-St-Zip:

FILED Apr 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11471 W. SAMPLE ROAD CORAL SPRINGS, FL 33065 **New Mailing Address: Current Mailing Address:** 11471 W. SAMPLE ROAD CORAL SPRINGS, FL 33065 FEI Number: 65-0990103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NADAYL, AUGUSTINE 11471 W. SAMPLE ROAD #34 CORAL SPRINGS, FL 33065 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition AUGUSTINE, NADAYK AUGUSTINE, NADAYIL Name: Name: 11471 W SAMPLE RD 34 11471 W SAMPLE RD 34 Address: Address: City-St-Zip: POMPANO BEACH, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065 Title: TD Title: () Change () Addition () Delete Name: NADAYIL, LIZY Name: 1152 N. UNIVERSITY DR. SUITE 303 Address: Address: PEMBROKE PINES, FL 33024 City-St-Zip: City-St-Zip: Title: Title: SD () Delete () Change () Addition NADAYIL, MARY Name: Name: 11471 W SAMPLE RD STE 34 Address: Address: City-St-Zip: POMPANO BEACH, FL 33065 City-St-Zip: Title: () Delete Title: VΡ () Change (X) Addition POOVAN, MATHEW Name: Name:

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

Address:

City-St-Zip:

11471 W SAMPLE RD 34

CORAL SPRINGS, FL 33065

SIGNATURE: AUGUSTINE NADAYIL PD 04/16/2007