

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000082880

Entity Name: M.B. ENTERTAINMENT, INC.

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

11220 INTERCHANGE CIRCLE NORTH  
MIRAMAR, FL 33025 US

## New Principal Place of Business:

## Current Mailing Address:

11220 INTERCHANGE CIRCLE NORTH  
MIRAMAR, FL 33025 US

## New Mailing Address:

FEI Number: 65-1036917

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BW & T BUSINESS ADVISERS, INC.  
9050 PINES BLVD  
450  
PEMBROKE PINES, FL 33024 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BRICENO, MARIELY  
Address: 15842 N W 10TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VD ( ) Delete  
Name: BRICENO, PEDRO  
Address: 15842 N W 10TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: STD ( ) Delete  
Name: PARDES DE BRICENO, INES  
Address: 15842 N W 10TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

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

SIGNATURE: BRICENO MARIELY

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date