

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000024147

Entity Name: MACGROUP CORP.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

3120 SW 144 AVENUE
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

7105 SW 8TH ST
306
MIAMI, FL 33144

New Mailing Address:

3120 SW 144 AVENUE
MIAMI, FL 33175

FEI Number: 65-1100324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, MACARIA
3120 SW 144 AVENUE
MIAMI, FL 33175 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: DPS () Delete
Name: GONZALEZ, MACARIA
Address: 3120 SW 144 AVENUE
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: GONZALEZ, EDDY
Address: 3120 SW 144 AVENUE
City-St-Zip: MIAMI, FL 33175

Title: DV () Delete
Name: GONZALEZ, EDITH V
Address: 3120 SW 144 AVENUE
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: FARIAS, JEANINE
Address: 377 RIDGEWOOD AVENUE
City-St-Zip: BROOKLYN, NY 11208

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:

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: MACARIA GONZALEZ

DPS

03/23/2009

Electronic Signature of Signing Officer or Director

Date