

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003420

FILED
Feb 01, 2005
Secretary of State

Entity Name: MYRDTOGO, INC.

Current Principal Place of Business:

11471 W. SAMPLE RD.
SUITE 37
CORAL SPRINGS, FL 33065

New Principal Place of Business:

11471 W. SAMPLE RD.
SUITE 9
CORAL SPRINGS, FL 33065

Current Mailing Address:

11471 W. SAMPLE RD.
SUITE 37
CORAL SPRINGS, FL 33065

New Mailing Address:

11471 W. SAMPLE RD.
SUITE 9
CORAL SPRINGS, FL 33065

FEI Number: 30-0020564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEGARRA, MAGDALINE
19151 N W 23RD COURT
PEMBROKE PINES, FL 33029 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: SEGARRA, MAGDALINE
Address: 19151 N W 23RD COURT
City-St-Zip: PEMBROKE PINES, FL 33029

Title: V () Delete
Name: KALLAS, CHRISTINE
Address: 4031 N.W. 106 DR.
City-St-Zip: CORAL SPRINGS, FL 33065

Title: T () Delete
Name: CLEWIS, SHARON
Address: 8600 N.W. 56 ST
City-St-Zip: CORAL SPRINGS, FL 33067

Title: S () Delete
Name: LOECHNER, DIANE
Address: 4824 N.E. 23RD AVE. #10
City-St-Zip: FORT LAUDERDALE, FL 33308

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 for the exemption stated in Section 119.07(3)(i), 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: CHRISTINE KALLAS

V

02/01/2005

Electronic Signature of Signing Officer or Director

_____ Date