

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003420

Entity Name: MYRDTOGO, INC.

FILED  
Jan 06, 2008  
Secretary of State

## Current Principal Place of Business:

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

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: CLEWIS, SHARON  
Address: 8600 N.W. 56 ST  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: S (X) Change ( ) Addition  
Name: SEGARRA, ORLANDO  
Address: 19151 N W 23RD COURT  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: T ( ) Change (X) Addition  
Name: WILLIAMS, JEFFERY  
Address: 8600 N.W. 56 ST  
City-St-Zip: CORAL SPRINGS, FL 33067

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: MAGDALINE SEGARRA

PD

01/06/2008

Electronic Signature of Signing Officer or Director

Date