2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000027226

Entity Name: M-FRONTIER, INC.

FILED Jul 13, 2009 Secretary of State

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 % MIGUEL M. GONZALEZ, P.A.
 % MIGUEL M. GONZALEZ, P.A.

 525 N.W. 27 AVENUE STE. 105A
 605 OCEAN DRIVE, APT. 3M

 MIAMI, FL 33125
 KEY BISCAYNE, FL 33149

Current Mailing Address: New Mailing Address:

 % MIGUEL M. GONZALEZ, P.A.
 % MIGUEL M. GONZALEZ, P.A.

 525 N.W. 27 AVENUE STE. 105A
 605 OCEAN DRIVE, APT. 3M

 MIAMI, FL 33125
 KEY BISCAYNE, FL 33149

FEI Number: 01-0658719 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:

GONZALEZ, MIGUEL M P.A.

C/O MIGUEL M. GONZALEZ, P.A.

525 NW 27TH AVENUE SUITE 105A

MIAMI, FL 33125 US

GONZALEZ, MIGUEL M P.A.

C/O MIGUEL M. GONZALEZ, P.A.

605 OCEAN DRIVE, APT. 3M

KEY BISCAYNE, FL 33149 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: MIGUEL M. GONZALEZ 07/13/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D () Delete
 Title: () Change () Addition

 Name:
 SHAH, WAYNE
 Name:

 Address:
 3430 S.W. 116TH AVENUE
 Address:

 City-St-Zip:
 DAVIE, FL 33330
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 LONGOBARDI, JOSEPH
 Name:

 Address:
 8825 SW 120 STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 GARDA, JUAN ALBERTO
 Name:

 Address:
 2 GROVE ISLE #1706
 Address:

 City-St-Zip:
 COCONUT GROVE, FL 33133
 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: JUAN ALBERTO GARDA D 07/13/2009