

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000027679

FILED
Jan 13, 2005
Secretary of State

Entity Name: MASS HOLDINGS, INC.

Current Principal Place of Business:

P.O. BOX 652107
MIAMI, FL 33265 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 652107
MIAMI, FL 33265 US

New Mailing Address:

FEI Number: 03-0416948 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AMADOR, ABEL
341 S.W. 135 AVENUE
MIAMI,, FL 33184 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: P () Delete
Name: AMADOR, ABEL
Address: P.O. BOX 652107
City-St-Zip: MIAMI, FL 33265 US

Title: VS () Delete
Name: AMADOR, SILVIA C
Address: P.O. BOX 652107
City-St-Zip: MIAMI, FL 33265 U

Title: VT () Delete
Name: AMADOR, SONIA Y
Address: P.O. BOX 652107
City-St-Zip: MIAMI, FL 33265 US

Title: VP () Delete
Name: AMADOR, MONICA C
Address: P.O. BOX 652107
City-St-Zip: MIAMI, FL 33265 US

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: ABEL AMADOR

P

01/13/2005

Electronic Signature of Signing Officer or Director

Date