

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000032537

Entity Name: MNA SOUVENIRS, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

6590 KIMBERLY BLVD
N LAUDERDALE, FL 33068

New Principal Place of Business:

Current Mailing Address:

6590 KIMBERLY BLVD
N LAUDERDALE, FL 33068

New Mailing Address:

FEI Number: 02-0572083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLIVAR, MONICA
6590 KIMBERLY BLVD
NORTH LAUDERDALE, FL 33068 US

Name and Address of New Registered Agent:

AMAR, MONICA
6590 KIMBERLY BLVD
NORTH LAUDERDALE, FL 33068 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: MONICA AMAR

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BOLIVAR, MONICA
Address: 6590 KIMBERLY BLVD.
City-St-Zip: NORTH LAUDERDALE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AMAR, MONICA
Address: 6590 KIMBERLY BLVD.
City-St-Zip: NORTH LAUDERDALE, FL 33068

I hereby certify that the information supplied with this filing does not qualify for the 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: MONICA AMAR

DR

04/28/2006

Electronic Signature of Signing Officer or Director

Date