

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000041122

FILED  
May 01, 2006  
Secretary of State

Entity Name: MAN POWER ENTERPRISE, INC.

## Current Principal Place of Business:

6600 NW 27TH AVENUE  
SUITE 106  
MIAMI, FL 33147

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 600293  
NORTH MIAMI BEACH, FL 33160

## New Mailing Address:

FEI Number: 46-0479000

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRAZIER, LARON  
6600 NW 27TH AVENUE  
MIAMI, FL 33147 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FRAZIER, LARON  
Address: 6600 NW 27TH AVENUE  
City-St-Zip: MIAMI, FL 33147

Title: VP ( ) Delete  
Name: FRAZIER, MARCIA  
Address: 6600 NW 27TH AVENUE  
City-St-Zip: MIAMI, FL 33147

Title: O ( ) Delete  
Name: WOLFGANG, GEORGE  
Address: 6600 NW 27TH AVENUE  
City-St-Zip: MIAMI, FL 33147

## 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:

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: LARON FRAZIER

P

05/01/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date