

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000075482

Entity Name: M.L.T. TRANSFER INC

FILED
May 04, 2006
Secretary of State

Current Principal Place of Business:

1800 NW 96 AVENUE
MIAMI, FL 33172

New Principal Place of Business:

815 N. HOMESTEAD BLVD.
403
HOMESTEAD, FL 33030

Current Mailing Address:

815 N. HOMESTEAD BLVD.
403
HOMESTEAD, FL 33033

New Mailing Address:

815 N. HOMESTEAD BLVD.
403
HOMESTEAD, FL 33030

FEI Number: 32-0023457

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POMARES, CHRISTIAN N
28125 SW 159 PLACE
HOMESTEAD, FL 33033 US

Name and Address of New Registered Agent:

POMARES, CHRISTIAN N
13859 SW 258 LANE
HOMESTEAD, FL 33032 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: CHRIS POMARES

05/04/2006

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: POMARES, ORLANDO SR
Address: 1800 NW 96 AVENUE
City-St-Zip: MIAMI, FL 33172

Title: VSD () Delete
Name: POMARES, CHRISTIAN N
Address: 28125 SW 159 PLACE
City-St-Zip: HOMESTEAD, FL 33033

Title: TD () Delete
Name: POMARES, VICTOR LEONEL
Address: 1800 NW 96 AVENUE
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POMARES, CHRIS
Address: 815 N. HOMESTEAD BLVD. # 403
City-St-Zip: HOMESTEAD, FL 33030

Title: VSD (X) Change () Addition
Name: POMARES, VICTOR L
Address: 815 N. HOMESTEAD BLVD. # 403
City-St-Zip: HOMESTEAD, FL 33030

Title: TD (X) Change () Addition
Name: POMARES, LIGIA
Address: 815 N. HOMESTEAD BLVD. # 403
City-St-Zip: HOMESTEAD, FL 33032

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: CHRIS POMARES

P

05/04/2006

Electronic Signature of Signing Officer or Director

Date