

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000132635

1. Entity Name
MHBG INVESTMENTS, INC.



Principal Place of Business
3000 ISLAND BLVD STE W55
AVENTURA, FL 33160

Mailing Address
3000 ISLAND BLVD STE W55
AVENTURA, FL 33160

DO NOT WRITE IN THIS SPACE

FILED
09 JAN 23 PM 12:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01152008 No Chg-P CR2E034 (11/05)

4. FEI Number
76-0721187

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HINDERLITER, MARIE
3000 ISLAND BLVD STE W55
AVENTURA, FL 33160

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resetting)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HINDERLITER, MARIE 3000 ISLAND BLVD. W55 AVENTURA, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GRAY, BARRY 3000 ISLAND BLVD. W55 AVENTURA, FL 33160
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JC 1/29

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Marie Hinderliter* *Marie Hinderliter* ~~Marie Hinderliter~~ *1/14/9*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #