

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000036150

Entity Name: MASTER DEVELOPER GROUP, INC.

FILED  
Mar 03, 2005  
Secretary of State

## Current Principal Place of Business:

3213 HARPERS FERRY CT.  
ORLANDO, FL 32837

## New Principal Place of Business:

12453 S.ORANGE BLOSSOM TRAIL #100  
ORLANDO, FL 32837

## Current Mailing Address:

3213 HARPERS FERRY CT.  
ORLANDO, FL 32837

## New Mailing Address:

12453 S ORANGE BLOSSOM TRAIL #100  
ORLANDO, FL 32837

FEI Number: 06-1686236

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VALENZANO, OMAIRA  
175 FOUNTAINEBLEAU BLVD., SUITE 1-B  
MIAMI, FL 33172 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: PD ( ) Delete  
Name: CASTORANI, LIDA I  
Address: 6727 S.W. 152ND PL  
City-St-Zip: MIAMI, FL 33193

Title: VP ( ) Delete  
Name: CASTORANI, BERNARDINO J  
Address: 3213 HARPERS FERRY COURT  
City-St-Zip: ORLANDO, FL 32837

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CASTORANI, LIDA I  
Address: 3213 HARPERS FERRY CT  
City-St-Zip: ORLANDO, FL 32837

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: LIDA CASTORANI

PD

03/03/2005

Electronic Signature of Signing Officer or Director

Date