

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000053592

FILED
Apr 30, 2009
Secretary of State

Entity Name: MINGO AFFILIATES SERVICES INC.

Current Principal Place of Business:

3755 N.W. 197TH ST.
MIAMI, FL 33055

New Principal Place of Business:

3755 N W 197TH ST.
MIAMI, FL 33055

Current Mailing Address:

3755 N.W. 197TH ST.
MIAMI, FL 33055

New Mailing Address:

4560 N W 5TH PLACE
PLANTATION, FL 33317

FEI Number: 57-1166411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MINGO, TIMOTHY C PRES
4560 NW 5TH PLACE
PLANTATION, FL 33317 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: MINGO, TIMOTHY C
Address: 4560 N W 5TH PLACE
City-St-Zip: PLANTATION, FL 33317

Title: SD () Delete
Name: SMALL, DELORIS D
Address: 20303 N W 28TH COURT
City-St-Zip: MIAMI, FL 33056

Title: T () Delete
Name: POWELL, CYNTHIA
Address: 1961 N.W. 187TH ST.
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: HARPER-MINGO, THELMA
Address: 4560 NW 5TH PLACE
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: MCCULLOUGH, SHIRLEY
Address: 3755 N.W. 197TH ST.
City-St-Zip: MIAMI, FL 33055

Title: D () Delete
Name: FEAD, CORA
Address: 3755 N.W. 197TH ST.
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: HARPER, JULES W
Address: 31 TOBINLEIGH COURT
City-St-Zip: ACKWORTH, GA 30101

Title: T (X) Change () Addition
Name: BRWON, ROBERT
Address: 5930 HOLMON AVE.. SUITE 201
City-St-Zip: MAMMAM, IN 46320

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: TIYAN, LAMIN
Address: 408 SOUTH TOWNE COURT
City-St-Zip: ANTIOCH, TN 37013

Title: D (X) Change () Addition
Name: NJIE, BABA
Address: 1242 WHEELER AVENUE #3
City-St-Zip: BRWONX, NY 10472

I hereby certify that the information supplied with this filing does not qualify 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: TIMOTHY MINGO

PD

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date