

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 14, 2005 08:00 AM Secretary of State

DOCUMENT # P0300062271
1. Entity Name
MAHLBERG INVESTMENT HOLDINGS INC.



Principal Place of Business
520 BRICKELL KEY DRIVE
SUITE 0-305
MIAMI, FL 33131
Mailing Address
520 BRICKELL KEY DRIVE
SUITE 0-305
MIAMI, FL 33131



2. Principal Place of Business
Suite, Apt. #, etc.
3. Mailing Address
Suite, Apt. #, etc.

01252005 Chg-P CR2E034 (10/03)

City & State
City & State

4. FEI Number
58-0843630
Applied For (Not Applicable)

Zip
Country
Zip
Country

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

6. Name and Address of Current Registered Agent
TRANSGLOBAL CORPORATE ADMINISTRATION, LLC
520 BRICKELL KEY DRIVE
SUITE 0-305
MIAMI, FL 33131

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number Is Not Acceptable)
City
FL Zip Code

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
Signature, type or printed name of registered agent and file if acceptable (NOTE: Registered Agent's signature required when re-registering) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS #1-11

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes entries for TAVARES DE MELO, ROMILDO and FIGUEIREDO, AFRA SUZANA.

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes handwritten entry: 02/14/05-80037-5002.

12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath...

SIGNATURE: [Handwritten Signature]
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 02/10/05
Days in Phone #: (305) 579-461