## ANNUAL REPORT (AR)

DOCU 1. Entity Nam MRH7, IN	no	P0300008369	92		·,		F	FII Seb 01, 200 Secretai			
Principal Place of Businoss Mailing Address 9604 CORTEZ ROAD #411 9604 CORTEZ ROAD #41 BRADENTON FL 34210 BRADENTON FL 34210											
2. Principal Placo of Business - No P.O. Box #				3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt #, etc.				1st MOORE CR2E034 (10/06)				
City & State			City & Stale				4. FEI Numi	4. FEI Number 06-1704046 Applied For Not Applicate			
Zip	Country				Coun	itry	5. Certificat	e of Status Desired		\$8.75 Ac	dditional
6. Name and Address of Current F				ed Agent			7. Name and Address of New Registered Agent				
HALLAM, MICHAEL R 9604 CORTEZ ROAD #411 BRADENTON FL 34210						Name Street Address City	(P.O Box Numi	per is Not Acceptable)	·— <u>-</u> -	Zíp Co	
9 The above	named antity of	Ihmite this etalament for	the our	nea of changing ite	ragistar	L '	ared agent of h	oth in the State of Flor	FI.	-	
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 .	Sweature, lyped or p	nnted name of registered agent a	and tide < app	otcable (NOT	E. Registere	d Agent signature require	ed when reinstating)		DATE	<del></del>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State							<u></u>	9. Election Campal Trust Fund Conti	-		.00 May Be
10.		OFFICERS AND		RS	11.		ADDITIONS	I CHANGES TO OFFICE	CERS AN	D DIRECTOR	RS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALLAM, MIC 9604 CORTE: BRADENTON	Z ROAD #411				į		U0000061 02/07/07-80	.6415 )027-0	□ Change 014 150.	<del></del>
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TITLE NAME STREET ADDRESS CITY ST-ZIP				☐ Delete	CITY	F ET ADDRESS -ST-ZIP				☐ Change	☐ Addillion
12. I horeby cortify that the information supplied with this filing does not quality for the exemptions contained in Section 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 eath, that I am an efficiency 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: Dayline Phone 4											