

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000036854

FILED  
Apr 08, 2006  
Secretary of State

Entity Name: MCF INTERNATIONAL, CORP.

## Current Principal Place of Business:

8008 NW 68 ST  
MIAMI, FL 33166

## New Principal Place of Business:

7900 NW 68TH. STREET  
MIAMI, FL 33166

## Current Mailing Address:

8008 NW 68 ST  
MIAMI, FL 33166

## New Mailing Address:

7900 NW 68TH. STREET  
MIAMI, FL 33166

FEI Number: 20-0796595

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CABANA, CLAUDIA S  
8008 NW 68 ST  
MIAMI, FL 33166 US

## Name and Address of New Registered Agent:

CABANA, CLAUDIA S  
7900 NW 68TH. STREET  
MIAMI, FL 33166 US

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:

04/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: CABANA, CLAUDIA S 50%  
Address: 8008 NW 68 ST  
City-St-Zip: MIAMI, FL 33166

Title: D ( ) Delete  
Name: CABANA, FEDERICO J 25%  
Address: 8008 NW 68 ST  
City-St-Zip: MIAMI, FL 33166

Title: D ( ) Delete  
Name: RUSSO SACCON, MARIANO G 25%  
Address: 8008 NW 68 ST  
City-St-Zip: MIAMI, FL 33166

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: CABANA, CLAUDIA S 40%  
Address: 7900 NW 68TH. STREET  
City-St-Zip: MIAMI, FL 33166

Title: D (X) Change ( ) Addition  
Name: CABANA, FEDERICO J 40%  
Address: 7900 NW 68TH. STREET  
City-St-Zip: MIAMI, FL 33166

Title: D (X) Change ( ) Addition  
Name: RUSSO SACCON, MARIANO G 10%  
Address: 7900 NW 68TH. STREET  
City-St-Zip: MIAMI, FL 33166

Title: D ( ) Change (X) Addition  
Name: CABANA, RICARDO R 10%  
Address: 7900 NW 68TH. STREET  
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the 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: CLAUDIA CABANA

D

04/08/2006

Electronic Signature of Signing Officer or Director

Date