

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059271

Entity Name: MASTEL INC.

FILED  
Apr 25, 2005  
Secretary of State

## Current Principal Place of Business:

1740 OPEN FIELD LOOP  
BRANDON, FL 33510

## New Principal Place of Business:

18011 MALAKAI ISLE DR.  
TAMPA, FL 33647

## Current Mailing Address:

PO BOX 485  
RIVERVIEW, FL 33568

## New Mailing Address:

18011 MALAKAI ISLE DR.  
TAMPA, FL 33647

FEI Number: 56-2452637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: PSTD ( ) Delete  
Name: MASTELLIS, DOUGLAS  
Address: 1740 OPEN FIELD LOOP  
City-St-Zip: BRANDON, FL 33510

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: MASTELLIS, DOUGLAS  
Address: 18011 MALAKAI ISLE DR.  
City-St-Zip: TAMPA, FL 33647

Title: S ( ) Change (X) Addition  
Name: MASTELLIS, MEGHAN  
Address: 18011 MALAKAI ISLE DR.  
City-St-Zip: TAMPA, FL 33647

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: DOUGLAS MASTELLIS

PSTD

04/25/2005

Electronic Signature of Signing Officer or Director

Date