

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000080904

FILED
Mar 19, 2009
Secretary of State

Entity Name: M.G. SUPPORT SERVICES, INC.

Current Principal Place of Business:

2750 NE 183RD ST, STE 306
AVENTURA, FL 33160

New Principal Place of Business:

Current Mailing Address:

2750 NE 183RD ST, STE 306
AVENTURA, FL 33160

New Mailing Address:

FEI Number: 55-0868490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ADELSON, ANTHONY S PA
2100 EAST HALLANDALE BEACH BLVD
#400
HALLANDALE BEACH, FL 33009 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: PERRAULT, RAIZA
Address: 1130 BUTTERNUT
City-St-Zip: HOLLYWOOD, FL 33019

Title: STD () Delete
Name: MORENO, CONRADO A
Address: 2750 NE 183RD ST APT 306
City-St-Zip: AVENTURA, FL 33160

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D () Change (X) Addition
Name: MARTINEZ MARMOL, ALEXANDRA
Address: 677 SW 111ST AVE. EDIF. 13 #302
City-St-Zip: PEMBROKES PINES, FL 33025

Title: D () Change (X) Addition
Name: MARMOL, HENRY
Address: 677 SW 111ST AVE. EDIF. 13 #302
City-St-Zip: PEMBROKES PINES, FL 33025

Title: D () Change (X) Addition
Name: MARTINEZ DE MORENO, INGRID F
Address: 2750 NE 183RD ST APT 306
City-St-Zip: AVENTURA, FL 33160

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: CONRADO A MORENO

D

03/19/2009

Electronic Signature of Signing Officer or Director

Date