

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000084236	
1. Entity Name MNS VENTURES, INC.	

Principal Place of Business 4065 S.W. 152ND AVE. MIRAMAR, FL 33027	Mailing Address 4065 S.W. 152ND AVE. MIRAMAR, FL 33027
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01142006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 30-0254711	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent RODRIGUEZ, JOHN JR. 4065 S.W. 152ND AVE. MIRAMAR, FL 33027
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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 _____ (NOTE: Registered Agent signature required when returning) DATE _____
Signature, typed or printed name of registered agent and title if applicable

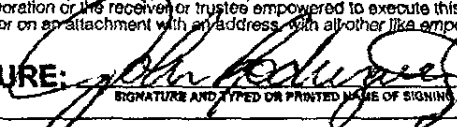
**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE P	RODRIGUEZ, ELIZABETH
NAME	4065 S.W. 152ND AVE.
STREET ADDRESS	MIRAMAR, FL 33027
CITY-ST-ZIP	
TITLE VP	RODRIGUEZ, JOHN JR.
NAME	4065 S.W. 152ND AVE.
STREET ADDRESS	MIRAMAR, FL 33027
CITY-ST-ZIP	
TITLE S	RODRIGUEZ, MONIQUE C
NAME	4065 S.W. 152ND AVE.
STREET ADDRESS	MIRAMAR, FL 33027
CITY-ST-ZIP	
TITLE T	RODRIGUEZ, NICOLE E.
NAME	4065 SW 152 AVE.
STREET ADDRESS	MIRAMAR, FL 33027
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **JOHN RODRIGUEZ, JR** 3/23/06 432-5767
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #