

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000124094

Entity Name: M G SOLUTIONS, INC.

FILED  
Apr 19, 2005  
Secretary of State

## Current Principal Place of Business:

10294 NW 9TH ST. CIR., SUITE 202  
MIAMI, FL 33172

## New Principal Place of Business:

395 NW 86 PL  
1  
MIAMI, FL 33126

## Current Mailing Address:

10294 NW 9TH ST. CIR., SUITE 202  
MIAMI, FL 33172

## New Mailing Address:

395 NW 86 PL  
1  
MIAMI, FL 33126

FEI Number: 20-1556185

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROMEU, MARCO  
10294 NW 9TH ST. CIR., SUITE 202  
MIAMI, FL 33172 US

## Name and Address of New Registered Agent:

ROMEU, MARCO  
395 NW 86 PL  
1  
MIAMI, FL 33126 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: MARCO ROMEU

04/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ROMEU, MARCO  
Address: 10294 NW 9TH ST. CIR., SUITE 202  
City-St-Zip: MIAMI, FL 33172

Title: VD ( ) Delete  
Name: HERRERA, GRETA  
Address: 3091 NW 58TH PLACE  
City-St-Zip: VIRGINIA GARDENS, MI 33166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ROMEU, MARCO  
Address: 395 NW 86 PL # 1  
City-St-Zip: MIAMI, FL 33126

Title: VD (X) Change ( ) Addition  
Name: HERRERA, GRETA  
Address: 12247 SW 17 LN APT 101  
City-St-Zip: MIAMI, FL 33175

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: MARCO ROMEU

PD

04/19/2005

Electronic Signature of Signing Officer or Director

Date