

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129286

Entity Name: MLA INTERNATIONAL CORP.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

7802 KINGSPORTE PKWY.
201
ORLANDO, FL 32819

New Principal Place of Business:

7802 KINGSPORTE PKWY.
202
ORLANDO, FL 32819

Current Mailing Address:

PO BOX 690159
ORLANDO, FL 32869

New Mailing Address:

FEI Number: 20-1637264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPES, CLAUBER C
5512 SPRING RUN AVE.
ORLANDO, FL 32819 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: VP () Delete
Name: LOPES, CLAUBER
Address: 5512 SPRING RUN AVE.
City-St-Zip: ORLANDO, FL 32819

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: BRAZ, DAVID
Address: 8730 KENMURE CV
City-St-Zip: ORLANDO, FL 32836

Title: S () Change (X) Addition
Name: LOPES, CLAUBER
Address: 5512 SPRING RUN AVE.
City-St-Zip: ORLANDO, FL 32819

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: CLAUBER LOPES

S

04/29/2005

Electronic Signature of Signing Officer or Director

Date