

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000139635

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: MGM 14 CORP.

## Current Principal Place of Business:

16802 S.W. 143RD PLACE  
MIAMI, FL 33177 US

## New Principal Place of Business:

14215 SW 54 STREET  
MIAMI, FL 33175 US

## Current Mailing Address:

P.O.BOX 654913  
MIAMI, FL 33265 US

## New Mailing Address:

FEI Number: 20-1728945      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TORRENTE, GEORGE L  
16802 S.W. 143RD PLACE  
MIAMI, FL 33177 US

## Name and Address of New Registered Agent:

TORRENTE, GEORGE L  
14215 SW 54 STREET  
MIAMI, FL 33175 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/25/2009

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: TORRENTE, GEORGE L  
Address: 16802 S.W. 143RD PLACE  
City-St-Zip: MIAMI, FL 33177 US

Title: DVT ( ) Delete  
Name: TORRENTE, MATILDE  
Address: 16802 S.W. 143RD PLACE  
City-St-Zip: MIAMI, FL 33177 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: TORRENTE, GEORGE L  
Address: 14215 SW 54 STREET  
City-St-Zip: MIAMI, FL 33175 US

Title: DVT (X) Change ( ) Addition  
Name: TORRENTE, MATILDE  
Address: 14215 SW 54 STREET  
City-St-Zip: MIAMI, FL 33175 US

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: GEORGE L. TORRENTE

Electronic Signature of Signing Officer or Director

DPS

02/25/2009

Date