2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P05000002166

1. Entity Name

MEC INVESTMENT GROUP, INC.



FILED Feb 27, 2008 08:00 AN Secretary of State

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|--|--|--|------------------|--|--|---------|
| Principal Place of Business 7820 NW 174TH TERRACE MIAMI FL 33015 | | Marling Address 7820 NW 174TH TERRACE MIAMI FL 33015 | | | | |
| 2. Principal Place of Business - No P.C. Box # | | 3. Mailing Artdress | | | FIGURES WESTER SHIP BENDERED BESTER HERVESTED BITTER SHIPE IN SERVICE STATES SHIPE BITTER IN LEGISLATION OF THE SHIPE SH | |
| Suite, Apt. #, etc. | | Suite, Apt. #, eic | | | 1st MOORE CR2E034 (10/07) | |
| City & State | | City & State | | | 4. FEI Number 59-3794191 Applied For Not Applied | |
| Zıjɔ | Country | Zip Co. | | try | S. Certificate of Status Desired | |
| 6. Name and Address of Curren | | t Registered Agent | Renistered Anent | | 7. Name and Address of New Registered Agent | |
| | | | Name | | | |
| 782 | ENEZ-ROJO, LEONOR 0 NW 174TH TERRACE MI FL 33015 | | | Street Address (P.O. Box Number is Not Acceptable) | | |
| | 2 000 10 | | | | | _ |
| | | | | City | FL Zip Code | |
| | named entity submits this statement fi ions of registered agent. | or the purpose of changing its | s registere | ed office or regist | stered agent, or both, in the State of Florida. I am familiar with, and accep | tc |
| SIGNATURE | Sandure, typed or primed basis of regisped agen | O.th procedure Letterest | F Facis://ie | d Agent signature requi | ered when remained) DATE | |
| After | ILE NOW!!! FEE IS \$150.00 May 1, 2008 Fee Will Be \$550.00 Payable to Florida Department of | 0 | | | 9. Election Campaign Financing \$5.00 May 8 Trust Fund Contribution. Added to Fees | æ |
| 10. | OFFICERS AND DIRECTORS 11 | | 11. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE | Ь | ☐ Derete | THE | | ☐ Change ☐ Addition | an a |
| NAME | GARCIA, ESTHER | □ 00 010 | NAM | | | |
| STREET ADDRESS | 7820 NW 174TH TERRACE | | | ET ADDRESS | U00000841574 | |
| CITY-ST-ZIP | MIAMI FL 33015 | | CITY | -ST-ZIP | 03/10/08-80023-009 150.00 | |
| TITLE | D | ☐ Derete | TITL | : | ☐ Change ☐ Addıti | <u></u> |
| NAME | TIO, MARTHA | ☐ De-alc | MAU | | | ‴ |
| STREET ADDRESS | 7820 NW 174TH TERRACE | | | FT ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL 33015 | | | -ST-ZIP | | ļ |
| TOLE | ID | ☐ Derete | THIL | | ☐ Change ☐ Additi | |
| NAME | JIMENEZ ROJO, LEONOR | ☐ Deiste | MAM | i | | JI. |
| | 7820 NW 174TH TERRACE | | 2 | ET ADDRESS | | i |
| CITY-ST-ZIP | MIAMI FL 33015 | | | -ST-ZIP | | |
| | INTERIOR L 33013 | | _ | | ☐ Change ☐ Additu | |
| TIFLE | | ☐ De ete | TITE | | Grange Andre | J11 |
| NAME CIRCLE ADDRESS | 1 | | NAM | ET ADDRESS | | |
| STREET ADDRESS CITY-S1-ZIP | | | | -S1- <u>71</u> P | | |
| | | Printed | | | | _ |
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| NAME | | | NAM | I | | ł |
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| STREET ACCRESS | | | | ET ADEIRESS | | |
| CITY OF 710 | 1 | | E DITY | . CT. 7(D | | ļ |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/08

3 05-8 25-4956 Day: me Faoire