2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000007283

Entity Name: MAS BROADBAND INC

Address:

City-St-Zip:

2288 SUNSET DRIVE

MIAMI BEACH, FL 33140

FILED May 11, 2007 Secretary of State

	er w/obito				
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
374 ANSIN BLVD HALLANDALE, FL 33009			6619 SOUTH DIXIE # 313 MIAMI, FL 33143		
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
P.O. BOX SOUTH M	431499 IIAMI, FL 33243	31499			
FEI Number	: 59-3795447	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Surrent Registered Agent:	Name and Address	of New Registered Agent:	
7300 SW 6 MIAMI, FL The above in the State	33143 US e named entity se of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATUI		ic Signature of Registered Age		 Date	
Election Car		g Trust Fund Contribution ().		Butte	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	D () KOROSCHETZ 5500 SW 86 ST MIAMI, FL 331	†	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DABROWSKI, H 5500 SW 86 ST MIAMI, FL 331	Ī	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () FIGALLO, HEC 7300 SW 67 CT MIAMI, FL 331	Γ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TRIAY, MIGUEL 600 GRAPETRI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () STOLLENWER	Delete K, RICHARD	Title: Name:	() Change () Addition	

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.

Address: City-St-Zip:

SIGNATURE: HECTOR L FIGALLO SCR 05/11/2007