

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000014308

Entity Name: FUN MLM, INC.

FILED  
Apr 11, 2007  
Secretary of State

## Current Principal Place of Business:

2825 N. COURSE DRIVE  
APT 209  
POMPANO BEACH, FL 33069

## Current Mailing Address:

P.O. BOX 668487  
POMPANO BEACH, FL 330668487 US

## New Principal Place of Business:

5192 NE 6 AVENUE  
APT 818  
OAKLAND PARK, FL 33334

## New Mailing Address:

FEI Number: 38-3718075      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DUEÑAS, GUSTAVO  
2825 N. COURSE DRIVE  
APT 209  
POMPANO BEACH, FL 33069 US

## Name and Address of New Registered Agent:

DUEÑAS, GUSTAVO  
5192 NE 6 AVENUE  
APT 818  
OAKLAND PARK, FL 33334 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: GUSTAVO DUEÑAS

04/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DUEÑAS, GUSTAVO  
Address: 2825 N. COURSE DRIVE  
City-St-Zip: POMPAÑO BEACH, FL 33069

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DUEÑAS, GUSTAVO  
Address: 5192 NE 6 AVENUE APT 818  
City-St-Zip: OAKLAND PARK, FL 33334

Title: VP ( ) Change (X) Addition  
Name: ECHEANDIA, HAYDEE E  
Address: 5192 NE 6 AVENUE APT 818  
City-St-Zip: OAKLAND PARK, FL 33334

I hereby certify that the information supplied with this filing does not qualify for the 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: GUSTAVO DUEÑAS

P

04/11/2007

Electronic Signature of Signing Officer or Director

Date