

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000033333

FILED
Mar 15, 2007
Secretary of State

Entity Name: MF FINANCIAL CONSULTANTS, INC.

Current Principal Place of Business:

16369 NW 18TH. STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

20003 OAKFLOWER AVENUE
TAMPA, FL 33647

Current Mailing Address:

16369 NW 18TH. STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

20003 OAKFLOWER AVENUE
TAMPA, FL 33647

FEI Number: 20-2442446

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FONTIN, MARCEL
16369 NW 18TH. STREET
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

FONTIN, MARCEL
20003 OAKFLOWER AVENUE
TAMPA, FL 33647 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:

03/15/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FONTIN, MARCEL
Address: 16369 NW 18TH. STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP () Delete
Name: FONTIN, ADAMS M
Address: 16369 NW 18TH. STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP () Delete
Name: FONTIN, ALAIN
Address: 16369 NW 18TH. STREET
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FONTIN, MARCEL
Address: 20003 OAKFLOWER AVENUE
City-St-Zip: TAMPA, FL 33647

Title: VP (X) Change () Addition
Name: FONTIN, ADAMS M
Address: 20003 OAKFLOWER AVENUE
City-St-Zip: TAMPA, FL 33647

Title: VP (X) Change () Addition
Name: FONTIN, ALAIN
Address: 20003 OAKFLOWER AVENUE
City-St-Zip: TAMPA, FL 33647

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: MARCEL FONTIN

MR

03/15/2007

Electronic Signature of Signing Officer or Director

Date