2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000088932

Entity Name: MACH 1 ENTERPRISES INC.

FILED Jul 19, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

SUSSEX A # 12 CENT. VILLAGE SUSSEX A # 21 CENT. VILLAGE

WEST PALM BEACH, FL 334176819 US #21

WEST PALM BEACH, FL 334176819 US

Current Mailing Address: New Mailing Address:

SUSSEX A # 12 CENT. VILLAGE SUSSEX A # 21 CENT. VILLAGE

WEST PALM BEACH, FL 334176819 US #

WEST PALM BEACH, FL 334176819 US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MUNTEANU, SORIN
SUSSEX A # 12 CENT. VILLAGE
MUNTEANU, SORIN
SUSSEX A # 21 CENT. VILL

SUSSEX A # 12 CENT. VILLAGE
WEST PALM BEACH, FL 334176819 US
SUSSEX A # 21 CENT. VILLAGE
#21

WEST PALM BEACH, FL 334176819 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: 07/19/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 $\label{eq:title:DP} \mbox{Title:} \qquad \mbox{D,P} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{D,P} \qquad \mbox{(X) Change () Addition}$

Name: MUNTEANU, SORIN Name: MUNTEANU, SORIN

Address: SUSSEX A # 12 CENT. VILLAGE Address: SUSSEX A # 21 CENT. VILLAGE
City-St-Zip: WEST PALM BEACH, FL 334176819 US City-St-Zip: WEST PALM BEACH, FL 334176819 US

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: SORIN MUNTEANU D.P 07/19/2006