

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000119971

Entity Name: MAHOGANY PLUS, INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

20151 NW 59 CT.
MIAMI, FL 33015

New Principal Place of Business:

Current Mailing Address:

20151 NW 59 CT.
MIAMI, FL 33015

New Mailing Address:

P.O. BOX 17337
HIALEAH, FL 33017

FEI Number: 20-3388969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORUA, SCARLET
20151 NW 59 CT..
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: MORUA, SCARLET
Address: 20151 NW 59 CT.
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: SCARLET MORUA

P/D

05/01/2009

Electronic Signature of Signing Officer or Director

Date