FILED Aug 23, 2007 8:00 am Secretary of State 07-24-2007 90039 023 ***150.00

2007 FOR PROFIT CORPOPATION
ANNUAL REPORT
O7-24-2007 90039 0

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DOCUMENT # P06000043838 1. Entity Name M & L INTERNATIONAL PROPERTIES, INC.										
Principal Place of Business Mailing Address					·	┪				
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2414 W LEMON ST				,	1. b b	MUTAGE				
TAMPA, FL 33609 TAMPA, FL 33609					1					
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2. Principal Place of Business - No P.O. Box # 3. Mailing Address						1				
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Suite, Apt. #, etc. Suite, Apt. #, etc.				07052007	Chg-P	CR2E034 (12/06	1			
						City"	\$142C05+ (1200	''		
City & State City & State						4. El Numb	10101	$ \Delta \Delta \Delta \Delta \Delta $	Applied For	
						QU-	8630	080	Not Applicable	
Zip	Zip Country		Zip Coun		niry	5. Certificati	of Status Desired	3 \$8.75 ∧		
		<u> </u>		<u></u>	,	L.,		Fee Requi	red	
6. Name and Address of Current Registered Agent					1	7. Name and	d Address of New	Registered Agent		
ALDUDY	MICHAEL	DENADO			Name					
	ALBURY, MICHAEL RENARD 2414 W LEMON ST					Street Address (P.O. Box Number is Not Acceptable)				
								·		
TAMPA, FL 33609										
					City			E1 Zip Co	de	
•					J.,			FL ZpCo		
8. The above	e named entil	y submits this statement (c	the purpose of changing its	register	ed office or register	red agent, or bo	oth, in the State of Fl	lorida. I am familiar witt	, and accept	
the obliga	tions of regist	ered agent.	•							
SIGNATURE.										
SIGNATURE.	Signature, typed	or printed name of regularied agent.	and tale if applicable (NOT	E Registere	d Agent signessive required	t when reinstating)		DATE		
							1			
FI	LE NOW!!	FEE IS \$150.00	9. Election Campa			.00 Мау Ве	In accordance	with s. 607.193(2)(b)	, F.Ş., the	
D	ue by Sep	tember 14, 2007	Trust Fund Con	tribution.	☐ Add	ed to Fees	corporation did	not receive the prior	notice.	
10,		OFFICERS AND	DIRECTORS:	11.		ADDITIONS	CHANGES TO OFF	ICERS AND DIRECTOR	RS IN 11	
TITLE	TCEO		Delete	101				☐ Change	Addition	
NAME	ALBURY,	MICHAEL RENARD	17.5	NAM	٤				•	
STREET ADORESS	2414 W LI	EMON ST	#(~	STRE	ET ADDRESS					
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NAME SIRLET ADDRESS CITY-SI-ZIP	certify that the	information supplied with	this filling does not qualify fo	NAMES STREET	E EI ADDRESS	in Chapter 119	l, Florida Siatutes. I	luther certify that the i	nformation	
NAME SIREFIADDRESS CITY-SI-ZIP 12. I hereby of indicated of the cor	on this repor	t or supplemental report is e receiver or trustee empo	this filing does not qualify for true and accurate and that wered to execute this report	NAME SIRE CITY or The exe my signat	E ADDRESS ST-ZIP Imptions contained ure shell have the s	ama lagal effec	t as if made under d	further certify that the in	nformation or director	
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