

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000074811

FILED
Mar 31, 2008
Secretary of State

Entity Name: M.L.F. AND ASSOCIATES, INC.

Current Principal Place of Business:

6550 NORTH FEDERAL HIGHWAY SUITE 220
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

6550 NORTH FEDERAL HIGHWAY SUITE 220
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 20-4989783

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOTTE, JOHN F ESQ
6550 NORTH FEDERAL HIGHWAY SUITE 220
FORT LAUDERDALE, FL 33308 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: DUBREUIL, LAURE H
Address: 6550 NORTH FEDERAL HIGHWAY SUITE 220
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: DCD () Delete
Name: VUKMIROVIC, MILAN
Address: 6550 NORTH FEDERAL HIGHWAY SUITE 220
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: DCOO () Delete
Name: DECHNIK, FREDERIC
Address: 6550 NORTH FEDERAL HIGHWAY SUITE 220
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: DUBREUIL, MARC H
Address: 6550 NORTH FEDERAL HIGHWAY SUITE 220
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: DS () Delete
Name: ROBERT, LUC
Address: 6550 NORTH FEDERAL HIGHWAY SUITE 220
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: DUBREUIL, FRANCOIS H
Address: 6550 NORTH FEDERAL HIGHWAY SUITE 220
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: LUC ROBERT

DS

03/31/2008

Electronic Signature of Signing Officer or Director

Date