

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000076848

Entity Name: MHZ SOLUTIONZ, INC.

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1520 NORTH MAGNOLIA AVENUE  
OCALA, FL 34475

**New Principal Place of Business:**

636 NW 27TH AVENUE  
OCALA, FL 34475

**Current Mailing Address:**

1520 NORTH MAGNOLIA AVENUE  
OCALA, FL 34475

**New Mailing Address:**

636 NW 27TH AVENUE  
OCALA, FL 34475

FEI Number: 20-4980300

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALI, MAHMOOD M  
6209 NW 12TH STREET  
OCALA, FL 34482 US

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

ALI, MAHMOOD M  
4215 SW 32ND STREET  
OCALA, FL 34474 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: MAHMOOD M ALI

01/07/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ALI, MIR M  
Address: 4215 SW 32ND STREET  
City-St-Zip: Ocala, FL 34474

I hereby 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 all other like empowered.

SIGNATURE: MIR M ALI

P

01/07/2010

Electronic Signature of Signing Officer or Director

Date