2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000078813

Entity Name: M V S CONSULTING, INC.

FILED Apr 27, 2007 Secretary of State

Name and Address of Current Registered Agent: ARIAS, AL 14954 SW 64 ST MIAMI, FL 33193 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().	•	,			
MIAMI, FL 33193 Current Mailing Address: PO BOX 650829 MIAMI, FL 33265 FEI Number: FEI Number Applied For (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: Name Agras, AL Address: Name and Address and and address and add	Current Pr	incipal Place of Business:	New Principal Place of	of Business:	
PO BOX 650829 MIAMI, FL 33265 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: ARIAS, AL 14954 SW 64 ST MIAMI, FL 33193 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Ititle: PD () Delete Title: () Change () Addition Name: ARIAS, AL Address: 14954 SW 64 ST Address: City-St-Zip: MIAMI, FL 33193 City-St-Zip: MIAMI, FL 33193 Title: VPD () Delete Title: () Change () Addition Name: ARIAS, LOURDES F Name: Address: 14954 SW 64 ST Address:					
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	Name: Address:	ARIAS, LOURDES F 14954 SW 64 ST	Name: Address:	() Change () Addition	

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: AL ARIAS PD 04/27/2007