2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000091072

Entity Name: MBS PROFESSIONAL SERVICES, INC.

FILED May 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

86111 EVERGREEN PLACE 86125 EVERGREEN PLACE

YULEE, FL 32097 YULEE, FL 32097

Current Mailing Address: New Mailing Address:

86111 EVERGREEN PLACE 86125 EVERGREEN PLACE

YULEE, FL 32097 YULEE, FL 32097

FEI Number: 20-5180922 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DASILVA, MARCELO B SHOCKMEDIA CORPORATION 86111 EVERGREEN PLACE 9766 OLD ST. AUGUSTINE RD YULEE, FL 32097 JACKSONVILLE, FL 32257 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: JOSE JARDIM JUNIOR 05/10/2007

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete (X) Change () Addition DASILVA, MARCELO B DA SILVA, MARCELO B Name: Name: 86111 EVERGREEN PLACE 86125 EVERGREEN PLACE Address: Address:

City-St-Zip: YULEE, FL 32097 City-St-Zip: YULEE, FL 32097

VΡ Title: VΡ Title: () Delete (X) Change () Addition Name: DASILVA, ELIANE B Name: DA SILVA, ELIANE B

86111 EVERGREEN PLACE 86125 EVERGREEN PLACE Address: Address: YULEE, FL 32097 YULEE, FL 32097 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete DASILVA, SILESIO DA SILVA, SILESIO Name: Name:

86111 EVERGREEN PLACE 86125 EVERGREEN PLACE Address: Address:

City-St-Zip: YULEE, FL 32097 City-St-Zip: YULEE, FL 32097

Title: () Delete Title: () Change () Addition Name:

LARROSSA, LÚIS A BRUN Name: Address: 3451 SALAND WAY Address: City-St-Zip: JACKSONVILLE, FL 32246 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.

Ρ SIGNATURE: MARCELO DA SILVA 05/10/2007