
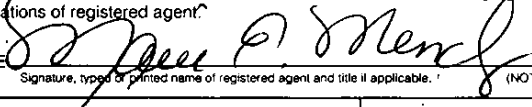
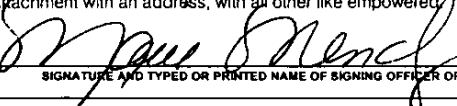


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2007 8:00 am
Secretary of State

03-13-2007 90012 042 ***158.75

DOCUMENT # P06000127151					
1. Entity Name M. L. 17 CORP					
Principal Place of Business 315 86 STREET #3 MIAMI BEACH, FL 33141 US			Mailing Address 315 86 STREET #3 MIAMI BEACH, FL 33141 US		
2. Principal Place of Business - No P.O. Box # 370 NE 211 St Suite, Apt. #, etc.		3. Mailing Address 370 NE 211 St Suite, Apt. #, etc.			
City & State North Miami Beach FL		City & State North Miami Beach, FL		4. FEI Number 20-5656509	
Zip 33179		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MENDEZ, MARIE E 315 86 STREET #3 MIAMI BEACH, FL 33141			7. Name and Address of New Registered Agent Name MARIE E MENDEZ Street Address (P.O. Box Number is Not Acceptable) 370 NE 211 St. City North Miami Beach FL Zip Code 33179		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  2/23/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> <small>DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D MENDEZ, LUIS M <input type="checkbox"/> Delete 315 86 STREET #3 MIAMI BEACH, FL 33141		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 370 NE 211 St. North Miami Beach, FL 33179	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T/D <input type="checkbox"/> Delete MENDEZ, MARIE E 315 86 STREET #3 MIAMI BEACH, FL 33141		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 370 NE 211 St. North Miami Beach, FL 33179	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			2/23/07 305-799-0937 <small>Date Daytime Phone #</small>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					