2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000154966

Entity Name: MLA MULTISERVICES, INC.

FILED Jul 22, 2008 Secretary of State

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

1949 COLONIAL BLVD FORT MYERS, FL 33907 1953 COLONIAL BLVD FORT MYERS, FL 33907

Current Mailing Address: New Mailing Address:

1949 COLONIAL BLVD 1953 COLONIAL BLVD FORT MYERS, FL 33907 FORT MYERS, FL 33907

FEI Number: 20-8080561 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:

FERNANDEZ, MAE

1949 COLONIAL BLVD

FORT MYERS, FL 33907 US

FORT MYERS, FL 33907 US

FORT MYERS, FL 33907 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: MAE SALCEDO FERNANDEZ 07/22/2008

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: P () Delete Title: P (X) Change () Addition Name: FERNANDEZ, MAE G P (X) Change () Addition FERNANDEZ, MAE G

 Address:
 1949 COLONIAL BVLD
 Address:
 1953 COLONIAL BVLD

 City-St-Zip:
 FORT MYERS, FL 33907
 City-St-Zip:
 FORT MYERS, FL 33907

Title: VP () Delete Title: VP (X) Change () Addition Name: FERNANDEZ, TOMMY R Name: FERNANDEZ, TOMMY R

Name:FERNANDEZ, TOMMY RName:FERNANDEZ, TOMMY RAddress:1949 COLONIAL BVLDAddress:1953 COLONIAL BVLDCity-St-Zip:FORT MYERS, FL 33907City-St-Zip:FORT MYERS, FL 33907

Title: D (X) Delete Title: () Change () Addition

 Name:
 SANTIAGO CRUZ, IGNACIO R
 Name:

 Address:
 1949 COLONIAL BVLD
 Address:

 City-St-Zip:
 FORT MYERS, FL 33907
 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: MAE SALCEDO FERNANDEZ P 07/22/2008