2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000156106

Entity Name: M D & SONS CORP

City-St-Zip:

FILED Jan 30, 2008 Secretary of State

| Current Principal Place of Business: | | | New Prince | New Principal Place of Business: | | |
|---|---|------------------------------|---|--|-------------------------------|--|
| 2672 CANC NORTH PC | DE LN DRT, FL 34286 | FL | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| 2672 CANO NORTH PO | DELN DRT, FL 34286 | FL | | | | |
| FEI Number: | 20-8086852 | FEI Number Applied For () | FEI Number Not App | licable () Cert | ificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and | Name and Address of New Registered Agent: | | |
| DIAZ, LORA 2672 CANO NORTH PO | | US | | | | |
| The above in the State | | bmits this statement for the | purpose of changing | ts registered office | or registered agent, or both, | |
| SIGNATUR | E: | | | | | |
| | Electronic | Signature of Registered Ag | jent | | Date | |
| Election Cam | paign Financing | Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | P () DIAZ, LORAYNE 2672 CANOE LN NORTH PORT, FI | Delete L 34286 US | Title: Name: Address: City-St-Zip: | ()Char | ge () Addition | |
| Title: Name: Address: City-St-Zip: | VP () DIAZ, MICHEL 2672 CANOE LN NORTH PORT, FI | Delete | Title: Name: Address: City-St-Zip: | ()Char | ge () Addition | |
| Title: Name: Address: | () [| Delete | Title: Name: Address: | VP () Char DIAZ, YULIET 10893 SW 3 STREE | ige (X) Addition ΓAPT #6 | |

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.

City-St-Zip:

MIAMI, FL 33174 US

SIGNATURE: LORAYNE DIAZ P 01/30/2008