2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000156106

Entity Name: MD & SONS CORP

FILED Mar 30, 2009 Secretary of State

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

2672 CANOE LN 10893 SW 3RD STREET

NORTH PORT, FL 34286 APT#6 FL

MIAMI, FL 33174

Current Mailing Address: New Mailing Address:

10893 SW 3RD STREET 2672 CANOE LN NORTH PORT, FL 34286 FL APT#6

MIAMI, FL 33174

FEI Number: 20-8086852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

DIAZ, LORAYNE DIAZ, MICHEL

10893 SW 3RD STREET 2672 CANOE LN NORTH PORT, FL 34286 APT#6 US MIAMI, FL 33174 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: MICHEL DIAZ 03/30/2009 Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

DIAZ, LORAYNE DIAZ, MICHEL Name: Name: 2672 CANOE LN 10893 SW 3RD STREET APT# 6 Address: Address:

City-St-Zip: NORTH PORT, FL 34286 US City-St-Zip: MIAMI, FL 33174 US

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

Name: DIAZ, MICHEL Name: DIAZ, LORAYNE

2672 CANOE LN 10893 SW 3RD STREET APT# 6 Address: Address:

NORTH PORT, FL 34286 US MIAMI, FL 33174 US City-St-Zip: City-St-Zip:

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

DIAZ, YULIET Name: 10893 SW 3 STREET APT #6 Address: City-St-Zip: MIAMI, FL 33174 US 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: MICHEL DIAZ 03/30/2009