

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000002897

Entity Name: MAS GLOBAL, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

340 PASEO REYES DR
SAINT AUGUSTINE, FL 32095

New Principal Place of Business:

245 BINNINGER DRIVE
SAINT AUGUSTINE, FL 32095

Current Mailing Address:

340 PASEO REYES DR
SAINT AUGUSTINE, FL 32095

New Mailing Address:

245 BINNINGER DRIVE
SAINT AUGUSTINE, FL 32095

FEI Number: 20-8213257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLMS, SUSAN S
434 SOPHIA TERRACE
ST. AUGUSTINE, FL 32095 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: SOLMS, SUSAN S
Address: 434 SOPHIA TERRACE
City-St-Zip: ST. AUGUSTINE, FL 32095 US

Title: P () Delete
Name: SOLMS, MICHAEL A
Address: 434 SOPHIA TERRACE
City-St-Zip: ST. AUGUSTINE, FL 32095 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: MICHAEL A. SOLMS

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date