

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000013941

FILED
Jan 03, 2008
Secretary of State

Entity Name: MUM INVESTMENT CORP.

Current Principal Place of Business:

15982 SW 143 LN
MIAMI, FL 33196

New Principal Place of Business:

Current Mailing Address:

15982 SW 143 LN
MIAMI, FL 33196

New Mailing Address:

FEI Number: 20-8356221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIGLIORELLI, MARIO
15982 SW 143 LN
MIAMI, FL 33196 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: PD () Delete
Name: MIGLIORELLI, MARIO
Address: 15982 SW 143 LN
City-St-Zip: MIAMI, FL 33196

Title: VPD () Delete
Name: MIGLIORELLI, SARA
Address: 15982 SW 143 LN
City-St-Zip: MIAMI, FL 33196

Title: TD () Delete
Name: MIGLIORELLI, MORELLA
Address: 15982 SW 143 LN
City-St-Zip: MIAMI, FL 33196

Title: SD () Delete
Name: MIGLIORELLI, MILENA
Address: 15982 SW 143 LN
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MILENA MIGLIORELLI SPARAGA

SD

01/03/2008

Electronic Signature of Signing Officer or Director

_____ Date