

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000058467

Entity Name: MAJNADSAY INC.

FILED
May 06, 2008
Secretary of State

Current Principal Place of Business:

6385 CHUB CAY AVENUE.
LANTANA, FL 33462 US

Current Mailing Address:

6385 CHUB CAY AVENUE.
LANTANA, FL 33462 US

New Principal Place of Business:

400 S FEDERAL HWY
SUITE #413
BOYNTON BEACH, FL 33435 US

New Mailing Address:

400 S FEDERAL HWY
SUITE #413
BOYNTON BEACH, FL 33435 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUZA, ALDICELIO N
6385 CHUB CAY AVENUE
LANTANA, FL 33462 US

Name and Address of New Registered Agent:

FONSECA, CESAR R
400 S. FEDERAL HWY
SUITE 413
BOYNTON BEACH, FL 33435 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: CESAR R FONSECA

05/06/2008

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:

Title: P () Delete
Name: SOUZA, ALDICELIO N
Address: 6385 CHUB CAY AVENUE
City-St-Zip: LANTANA, FL 33462 US

Title: VP () Delete
Name: FONSECA, CESAR R
Address: 1084 GROVE PARK CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33436 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SOUZA, ALDICELIO N
Address: 400 S FEDERAL HWY
City-St-Zip: BOYNTON BEACH, FL 33435 US

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: CESAR R FONSECA

VP

05/06/2008

Electronic Signature of Signing Officer or Director

Date