2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000089115

FILED May 01, 2009 Secretary of State

Entity Name: MULTICULTURAL PROMOTION & ENTERTAINMENT GROUP, INC.

Current P	rincipal Place	of Business:	New Principal Place	of Business:
	AKRIDGE ROA D, FL 32809	AD		
Current Mailing Address:		New Mailing Address:		
	AKRIDGE ROA D, FL 32809	AD		
El Number	: 26-0677449	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
5520 PE	CHRISTMENE BBLE RIDGE S GARDEN, FL (STREET		
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
n the State	e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
n the State	e of Florida. RE:	submits this statement for the particles of Registered Ag		d office or registered agent, or both, Date
n the State SIGNATUI	e of Florida. RE: Electror ice with s. 607.19	nic Signature of Registered Ag 3(2)(b), F.S., the corporation did no	ent	
n the State SIGNATUI n accordan Election Cal	e of Florida. RE: Electror ice with s. 607.19	nic Signature of Registered Ag 3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ent ot receive the prior notice.	
n the State SIGNATUI n accordan Election Cal	e of Florida. RE: Electron ice with s. 607.19 mpaign Financing S AND DIREC D JOSEPH, CHRI	nic Signature of Registered Ag 3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). TORS: Delete STMENE E RIDGE STREET	ent ot receive the prior notice.	Date
n the State SIGNATUI n accordant Section Car DFFICER sitte: lame: ddress:	e of Florida. RE: Electror See with s. 607.19 Impaign Financin SAND DIREC D JOSEPH, CHRI 15520 PEBBLE WINTER GARE D FLAVIL, FREST	nic Signature of Registered Agra(2)(b), F.S., the corporation did not grow from Contribution (). TORS: Delete STMENE ERIDGE STREET DEN, FL 34787 Delete NEL L POINTE BLVD APT 102	ent of receive the prior notice. ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: CAMILLE SAINTELISE D 05/01/2009