2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000037726

Entity Name: MGI SUPPLIERS, CORP

FILED Feb 27, 2009 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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4446 NW 111 CT 2800 GLADES CIRCLE

US DORAL, FL 33178 122

WESTON, FL 33327

Current Mailing Address: New Mailing Address:

4446 NW 111 CT 2800 GLADES CIRCLE DORAL, FL 33178 US

WESTON, FL 33327 US

FEI Number: 26-2403976 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HEIDENREICH, DANIEL MITRANO, VICENTE 4446 NW 111 CT 4337 PINE RIDGE CT DORAL, FL 33178 US WESTON, FL 33331

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: VICENTE MITRANO 02/27/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

MITRANO, VICENTE MITRANO, VICENTE Name: Name: 4446 NW 111 CT 4337 PINE RIDGE CT Address: Address: WESTON, FL 33331 US City-St-Zip: DORAL, FL 33178 US City-St-Zip:

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

Name: MITRANO, COSME Name: MITRANO, COSME 4446 NW 111 CT 4337 PINE RIDGE CT Address: Address: **DORAL, FL 33178 US** WESTON, FL 33331 US City-St-Zip: City-St-Zip:

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

DE MITRANO, CLAUDIA DE MITRANO, CLAUDIA Name: Name: 4446 NW 111 CT 4337 PINE RIDGE CT Address: Address: City-St-Zip: DORAL, FL 33178 US City-St-Zip: WESTON, FL 33331 US

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

CIMONE, ANA M CIMONE, ANA M Name: Name: Address: 4446 NW 111 CT Address: 4337 PINE RIDGE CT City-St-Zip: City-St-Zip: DORAL, FL 33178 US WESTON, FL 33331 US

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

HEIDENREICH, DANIEL Name: Name: 4446 NW 111 CT Address: Address: City-St-Zip: DORAL, FL 33178 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.

SIGNATURE: VICENTE MITRANO Ρ 02/27/2009