

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000046011

FILED
Mar 26, 2009
Secretary of State

Entity Name: MD IMMIGRATION SERVICES, CORP

Current Principal Place of Business:

7483 SW 24 STREET
SUITE 203
MIAMI, FL 33155

New Principal Place of Business:

175 FONTAINEBLEAU BLVD.
SUITE 1-R10
MIAMI, FL 33172

Current Mailing Address:

7483 SW 24 STREET
SUITE 203
MIAMI, FL 33155

New Mailing Address:

175 FONTAINEBLEAU BLVD.
SUITE 1-R10
MIAMI, FL 33172

FEI Number: 45-0595245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENIS, MAYELIN
7483 SW 24 STREET
SUITE 203
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

DENIS, MAYELIN
175 FONTAINEBLEAU BLVD.
SUITE 1-R10
MIAMI, FL 33172 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:

03/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DENIS, MAYELIN
Address: 7483 SW 24 STREET SUITE 203
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DENIS, MAYELIN
Address: 175 FONTAINEBLEAU BLVD. SUITE 1-R10
City-St-Zip: MIAMI, FL 33172

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: MAYELIN DENIS

P

03/26/2009

Electronic Signature of Signing Officer or Director

Date