2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000069419

Entity Name: MAS JUMBIES INC

City-St-Zip:

MIAMI, FL 332579998

FILED Jun 22, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:		
	183 TERRACE O BAY, FL 33				
Current Mailing Address:			New Mailing Address:		
	183 TERRACE O BAY, FL 33				
FEI Number:	: 26-0541185	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	CHAEL 183 TERRACE O BAY, FL 33				
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
		93(2)(b), F.S., the corporation did n ng Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (WONG WON, P.O. BOX 5700 MIAMI, FL 332	672	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VT (MARK, ANNET P.O. BOX 5700 MIAMI, FL 332	672	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	S (WONG WON, . P.O. BOX 5700		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: MARK, ANNETTE VT 06/22/2009