

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000106147

**FILED**  
**Feb 22, 2010**  
**Secretary of State**

**Entity Name:** MBM CAPITAL MANAGEMENT, INC.

**Current Principal Place of Business:**

36 ISLA BAHIA DRIVE  
FORT LAUDERDALE, FL 33316 US

**New Principal Place of Business:**

**Current Mailing Address:**

36 ISLA BAHIA DRIVE  
FORT LAUDERDALE, FL 33316 US

**New Mailing Address:**

**FEI Number:** 26-3829691

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YATES, CHRISTINE P ESQ  
C/O TRIPP SCOTT, P.A.  
110 SE 6TH STREET, 15TH FLOOR  
FORT LAUDERDALE, FL 33301 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DPTS  
**Name:** LEVINE, GREGORY A  
**Address:** 401 EAST LAS OLAS BLVD., SUITE 1400  
**City-St-Zip:** FORT LAUDERDALE, FL 33301 US

I hereby 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 all other like empowered.

**SIGNATURE:** GREGORY A. LEVINE

DPTS

02/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date