

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000098761

Entity Name: MFN SERVICES CORP.

**FILED**  
**Feb 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5346 SW 11TH PLACE  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

5346 SW 11TH PLACE  
CAPE CORAL, FL 33914

**New Mailing Address:**

FEI Number: 45-3761409

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

NEVES, MICHAEL  
5346 SW 11TH PLACE  
CAPE CORAL, FL 33914 US

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

NEVES, MICHAEL F  
5346 SW 11TH PLACE  
CAPE CORAL, FL 33914 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: MICHAEL F NEVES

02/26/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: NEVES, MICHAEL F  
Address: 5346 SW 11TH PLACE  
City-St-Zip: CAPE CORAL, FL 33914

Title: VP  
Name: NEVES, KRISTEN A  
Address: 9295 LAKE PARK DR P203  
City-St-Zip: FT MYERS, FL 33919

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: MICHAEL F NEVES

PRES

02/26/2012

Electronic Signature of Signing Officer or Director

Date