

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000042324

Entity Name: M.F.S. ENTERPRISES, INC.

FILED
May 05, 2009
Secretary of State

Current Principal Place of Business:

1864 NW 23 STREET
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

1864 NW 23 STREET
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-0471187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, ROSA
1864 NW 23 STREET
MIAMI, FL 33142 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DE ARMAS, JULIO SR
Address: 10050 SW 146
City-St-Zip: MIAMI, FL 33186

Title: S () Delete
Name: ALVAREZ, ROSA M
Address: 9718 S.W. 146TH COURT
City-St-Zip: MIAMI, FL 33186

Title: VP () Delete
Name: DE ARMAS, JULIO JR
Address: 1711 SW 85TH COURT
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ROSA ALVAREZ

T

05/05/2009

Electronic Signature of Signing Officer or Director

Date