


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 19, 2005 8:00 am
Secretary of State

07-19-2005 90039 026 ***150.00

DOCUMENT # P93000065938 1. Entity Name MDI INTERNATIONAL GROUP CORP.	
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Principal Place of Business 13790 SW 56 STREET SUITE K MIAMI, FL 33175 US	Mailing Address 13790 SW 56 STREET SUITE K MIAMI, FL 33175 US
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50056126



07062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0438626	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ISIDORA, MORVIN D 3786 SAN SIMONE'S CIRCLE WESTON, FL 33331	4153 Sapphire Tear
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ISIDORA, MORVIN D 3786 SAN SIMONE'S CIRCLE WESTON, FL 33331 4153 Sapphire Tear
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Morvin Isidora **7/1/05 954-389-7883**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #