## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000013467

FILED Jan 16, 2009 Secretary of State

| Entity Na   | me: MEDITE                                 | RRANEAN CEMENT COR  | P., INC.                                    |  |  |     |  |
|---|--|---|---|--|--|-----|--|
| Current P   | rincipal Plac                              | e of Business:  | New Prin                                    | New Principal Place of Business:             |  |     |  |
|   | N LANE DR                                  |   |   |  |  |     |  |
| 702<br>KEY BISC                                   | AYNE, FL 33                                | 1/10  |   |  |  |     |  |
|   | ,  |   |   |  |  |     |  |
| Current N   | lailing Addre                              | ss:   | New Mail                                    | New Mailing Address:                         |  |     |  |
| 177 OCEA<br>702                                   | N LANE DR                                  |   |   |  |  |     |  |
|   | AYNE, FL 33                                | 149   |   |  |  |     |  |
| FEI Number: 65-0468292 FEI Number Applied For ( ) |  |   | ) FEI Number Not App                        | olicable ( )                                 | Certificate of Status Desired ( )  |     |  |
| Name and  | Address of                                 | Current Registered Agen                                   | t: Name and                                 | Name and Address of New Registered Agent:    |  |     |  |
| 177 OCEA  | KIS, MICHEL<br>NN LANE DRIN<br>AYNE, FL 33 |   |   |  |  |     |  |
|   | named entity<br>e of Florida.              | submits this statement for                                | the purpose of changing                     | its registered                               | d office or registered agent, or bo  | th, |  |
| SIGNATU   | RE:  |   |   |  |  |     |  |
|   | Electro                                    | nic Signature of Registered                               | d Agent                                     |  | Date   | _   |  |
| Election Ca                                       | mpaign Financir                            | ng Trust Fund Contribution ( ).                           |   |  |  |     |  |
| OFFICERS AND DIRECTORS:                           |  |   | ADDITIO                                     | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |     |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:       | XENODAKIS, I<br>177 OEAN LAI               | ) Delete<br>MICHEL<br>NE DRDIVE 31202<br>IE, FL 331491428 | Title:<br>Name:<br>Address:<br>City-St-Zip: |  | (X) Change () Addition<br>S, MICHEL<br>ANE DRDIVE 702<br>YNE, FL 331491428 |     |  |
| Title:<br>Name:                                   | PS (<br>YENODAKIS, I                       | ) Delete<br>MICHAEL                                       | Title:<br>Name:                             | PS<br>XENODAKIS                              | (X) Change()Addition<br>S. MICHAEL   |     |  |

Title: VM ( ) Delete Name: WHITAKER, MARIA Address: 8946 BAY COVE CT

177 OCEAN LANE DR 702

ORLANDO, FL 32819

KEY BISCAYNE, FL 331491428

Address:

City-St-Zip:

City-St-Zip:

Title: () Change () Addition

177 OCEAN LANE DR 702

KEY BISCAYNE, FL 331491428

Name: Address: City-St-Zip:

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: MICHEL XENODAKIS **PRES** 01/16/2009