,2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:__

FILED Apr 21, 2006 08:00 AM Secretary of State

-	MILITORE	7171		- · · · · · · · · · · · · · · · · · · ·
DOCUMENT # P94000091749 1. Entity Name MLH FINANCIAL SERVICES, INC.				Secretary of State
Principal Plac	ce of Business	Mailing Address		1
('		-		'
1311 N. CH		1311 N. CHURCH AVE.		
TAMPA, FL	33001	TAMPA, FL 33607		
				T INDICADAL IND TAKE BARA BARA BARA BARA BARA BARA IBARA INDICADAL BARA BYANA INDICADAL INDICADAL INCIDADA IN
				03102008 No Chg-P CR2E034 (11/05)
E	O NOT WRITE	IN THIS SPA	CE	
_			~ · · · ;	4. FEI Number Applied For Not Applied For Not Applied For
		and the second second	Maria de la Companya	£9.75
				5. Certificate of Status Desired Fee Required
	6. Name and Address of Current Re	egistered Agent		!
	RICHARD M			DO NOT WRITE
	HURCH AVE.	r t		DO NOT WILLIAM
TAMPA, F	L 22001			IN THIS SPACE
			}	
			}	ì
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. 1 am familiar with, and accept the obligations of registered agent.				
SIGNATURE				
Signature, typed or proled name of registered agent and title if applicable (NOTE: Tragistared Agent signature required when reinstalling) DATE				
After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.			00 May Be and to Fees	
_10.	OFFICERS AND DI	RECTORS		
TITLE	PD		Į.	•
NAME	HABER, RICHARD M		ł	
STREET ADDRESS	1311 N. CHURCH AVE.	-	£ .	
CITY-ST-ZIP	TAMPA, FL		ì	
III/E	SDT			
NAME	MCDONALD, ROBERT L. JR.	* -		
STREET ADDRESS	1311 N CHURCH AVE			
CITY-ST-ZIP	TAMPA, FL		ł	<i>U</i> 00000522938
TITLE		····	ł	05/03/06-80052-014 150.0
NAME			}	
STREET ADDRESS			ł	
CITY-ST-ZIP			1	DO NOT WRITE
			i	
TIPLE			Į.	IN THIS SPACE
NAME		•	}	,
STREET ADDRESS CATY-ST-ZIP			•	
INTE }			}	
RAME			f	
STREET ADDRESS			i	
CITY-ST-ZIF				
TITLE	····		ŀ	
NAME {			l .	!
STREET ADDRESS				
CITY-ST-ZIP			ľ	
12. 1 hereby o	the his ball and sometime entitled with the	iling dose not qualify for the ave	motions assists	in Chapter 110 Decide State on 1 had a best that the later of
12. Thereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report jet be 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 employered to execute this eport as required by Chapter 507, 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 tike anyowered.				

Richard M. Haber

R1Ch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNARY OFFICER OR DIRECTOR

4/18/06

(813)876-832b