

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000015162

FILED  
Jan 03, 2007  
Secretary of State

Entity Name: MATTHEWS BROTHERS INVESTMENTS, INC.

## Current Principal Place of Business:

2124 N.E. 123RD STREET #211  
NORTH MIAMI, FL 33181

## New Principal Place of Business:

13000 CORONADO TERRACE  
NORTH MIAMI, FL 33181

## Current Mailing Address:

2124 N.E. 123RD STREET #211  
NORTH MIAMI, FL 33181

## New Mailing Address:

13000 CORONADO TERRACE  
NORTH MIAMI, FL 33181

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GANEM, SAL  
2124 N E 123 ST #203  
NORTH MIAMI, FL 33181 US

## Name and Address of New Registered Agent:

KEYS, CAROL  
12700 BISCAYNE BLVD.  
NORTH MIAMI, FL 33181 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: CAROL KEYS

01/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: TSD ( ) Delete  
Name: MATTHEWS, KRISTI  
Address: 2124 N.E. 123RD STREET #211  
City-St-Zip: NORTH MIAMI, FL 33181

Title: PD ( ) Delete  
Name: MATTHEWS, MICHAEL  
Address: 2124 N.E. 123RD STREET #211  
City-St-Zip: NORTH MIAMI, FL 33181

Title: VP (X) Delete  
Name: MATTHEWS, PETER  
Address: 2124 NE 123RD ST # 211  
City-St-Zip: MIAMI, FL 33181

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: MATTHEWS, KRISTI  
Address: 13000 CORONADO TERRACE  
City-St-Zip: NORTH MIAMI, FL 33181

Title: PD (X) Change ( ) Addition  
Name: MATTHEWS, MICHAEL  
Address: 13000 CORONADO TERRACE  
City-St-Zip: NORTH MIAMI, FL 33181

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL MATTHEWS

PD

01/03/2007

Electronic Signature of Signing Officer or Director

Date