

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000001553

Entity Name: M & B DEVELOPERS CORP.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

320 W 49 ST
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

320 W 49 ST
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 65-0927099

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAS, ACQUILES E
320 W 49 ST
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

MAS, ACQUILES E
320 W 49 ST
HIALEAH, FL 33012 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: AQUILES E. MAS

01/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAS, ACQUILES E
Address: 320 W 49 ST
City-St-Zip: HIALEAH, FL 33012

Title: V () Delete
Name: DENIS, JORGE
Address: 320 W 49 ST
City-St-Zip: HIALEAH, FL 33012

Title: S () Delete
Name: NAS, EUGENIA N
Address: 320 W 49 ST
City-St-Zip: HIALEAH, FL 33012

Title: D () Delete
Name: WING, ANA MARIA
Address: 1190 NW 90 TERR
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D (X) Delete
Name: MAS, ACQUILES J
Address: 11924 SW 100 TERR
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: MESSINA, MARITE N
Address: 4111 NW 115 TERR
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: MAS, EUGENIA N
Address: 320 W 49 ST
City-St-Zip: HIALEAH, FL 33012

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 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 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: AQUILES E. MAS

PRES

01/04/2005

Electronic Signature of Signing Officer or Director

Date