

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000047446

Entity Name: MDM HOSPITALITY GROUP, INC.

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

9090 SOUTH DADELAND BLVD
SUITE 210
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

9090 SOUTH DADELAND BLVD
SUITE 210
MIAMI, FL 33156

New Mailing Address:

FEI Number: 65-0934223 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARAGON, FLORENCE
9090 S. DADELAND BLVD
SUITE 210
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

APARICIO, ZAIDA
9090 S. DADELAND BLVD
SUITE 210
MIAMI, FL 33156 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: ZAIDA APARICIO

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PULENTA, LUIS
Address: 9090 SOUTH DADELAND BLVD
City-St-Zip: MIAMI, FL 33156

Title: VD () Delete
Name: GLAS, RICARDO
Address: 9090 SOUTH DADELAND BLVD
City-St-Zip: MIAMI, FL 33156

Title: S () Delete
Name: GARCIA, EDUARDO
Address: 9090 S. DADELAND BLVD
City-St-Zip: MIAMI, FL 33156

Title: T () Delete
Name: JEREZ, ALEJANDRO
Address: 9090 SOUTH DADELAND BLVD.
City-St-Zip: MIAMI, FL 33156

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: ALEJANDRO, JEREZ
Address: 9090 S. DADELAND BLVD
City-St-Zip: MIAMI, FL 33156

Title: T (X) Change () Addition
Name: SUPPES, OSVALDO
Address: 9090 SOUTH DADELAND BLVD.
City-St-Zip: MIAMI, FL 33156

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: LUIS PULENTA

PD

04/14/2009

Electronic Signature of Signing Officer or Director

Date