

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000069305

Entity Name: MOUNTAIN VENTURES, INC.

FILED
Jan 06, 2009
Secretary of State

Current Principal Place of Business:

8525 NW 53RD TERRACE 105
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

PO BOX 268658
FT. LAUDERDALE, FL 33332

New Mailing Address:

8525 NW 53RD TERRACE 105
MIAMI, FL 33166

FEI Number: 65-0977887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLAGHER, ROBERT
3515 WINDMILL RANCH RD
WESTON, FL 33331 US

Name and Address of New Registered Agent:

POWELL, ARNOLD
8525 NW 53RD TERRACE 105
MIAMI, FL 33166 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: ARNOLD POWELL

01/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GALLAGHER, ROBERT
Address: 3515 WINDMILL RANCH RD
City-St-Zip: WESTON, FL 33331

Title: V () Delete
Name: GALLAGHER, LORETTA
Address: 3515 WINDMILL RANCH RD
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GALLAGHER, ROBERT
Address: 701 S OLIVE AVE #2113
City-St-Zip: WEST PALM BEACH, FL 33401

Title: V (X) Change () Addition
Name: GALLAGHER, LORETTA
Address: 701 S OLIVE AVE #2113
City-St-Zip: WEST PALM BEACH, FL 33401

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: ROBERT L GALLAGHER

PD

01/06/2009

Electronic Signature of Signing Officer or Director

Date