

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000094811

Entity Name: MASORP, CORP.

FILED
Jan 09, 2008
Secretary of State

Current Principal Place of Business:

555 HIALEAH DR
HIALEAH, FL 33010 US

New Principal Place of Business:

Current Mailing Address:

8004 NW 154TH STREET
SUITE 257
MIAMI LAKES, FL 33016 US

New Mailing Address:

8004 NW 154TH STREET
SUITE 257
MIAMI LAKES, FL 33014 US

FEI Number: 65-0895341

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAREDES, MARIA E
8004 NW 154TH STREET
SUITE 257
MIAMI LAKES, FL 33016 US

Name and Address of New Registered Agent:

PAREDES, MARIA E
8004 NW 154TH STREET
SUITE 257
MIAMI LAKES, FL 33014 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: MARIA E. PAREDES

01/09/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: PAREDES, MARIA E
Address: 8004 NW 154TH STREET, SUITE 257
City-St-Zip: MIAMI LAKES, FL 33016

Title: DVT () Delete
Name: PAREDES, RAUL J
Address: 8004 NW 154TH STREET, SUITE 257
City-St-Zip: MIAMI LAKES, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: PAREDES, MARIA E
Address: 8004 NW 154TH STREET, SUITE 257
City-St-Zip: MIAMI LAKES, FL 33014

Title: DVT (X) Change () Addition
Name: PAREDES, RAUL J
Address: 8004 NW 154TH STREET, SUITE 257
City-St-Zip: MIAMI LAKES, FL 33014

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: MARIA E. PAREDES

DPS

01/09/2008

Electronic Signature of Signing Officer or Director

Date