2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000009713

Name:

Address:

City-St-Zip:

FORSHEE, BILL

220 MIRACLE MILE, SUITE 224

CORAL GABLES, FL 33134

Entity Name: MLF INFORMATION SYSTEMS, INC.

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
220 MIRAC	CLE MILE				
224 CORAL G	ABLES, FL 3	3134			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
220 MIRAG	CLE MILE				
	ABLES, FL 3	3134			
FEI Number:	: 65-0891619	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
FORSHEE 220 MIRAG 224 CORAL GA		3134 US			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	npaign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (MENDELSOH 16192 73RD LOXAHATCHI	CT. N.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LOCKWOOD 220 MIRACLE) Delete KEVIN E MILE, SUITE 224 ES, FL 33134	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VSD () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BILL FORSHEE **VSD** 04/17/2008

() Change () Addition