

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000067457

FILED  
Feb 13, 2008  
Secretary of State

Entity Name: MULTIBUSINESS INTERNATIONAL, INC.

## Current Principal Place of Business:

% ARACELY MUNOZ  
3400 S.W. 15 CT.  
FT. LAUDERDALE, FL 33312

## New Principal Place of Business:

164 NE 105TH STREET  
MIAMI SHORES, FL 33138 US

## Current Mailing Address:

% ARACELY MUNOZ  
3400 S.W. 15 CT.  
FT. LAUDERDALE, FL 33312

## New Mailing Address:

PO BOX  
MIAMI, FL 33160 US

FEI Number: 65-0937360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NOVOA, MELBA M  
% ARACELY MUNOZ  
3400 S.W. 15 CT.  
FT. LAUDERDALE, FL 33312 US

## Name and Address of New Registered Agent:

NAVARRO, CARMEN V CFO  
164 NE 105TH STREET  
MIAMI SHORES, FL 33138 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: CARMEN NAVARRO

02/13/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: NOVOA, NORELLA M  
Address: 2187 NW 139 AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VSD ( ) Delete  
Name: NOVOA, MELBA M  
Address: 2187 NW 139 AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: TD (X) Delete  
Name: GONZALEZ DE NOVA, MERCEDES  
Address: 2187 NW 139 AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: RIVERO, EDGARDO E CEO  
Address: PO BOX 601573  
City-St-Zip: MIAMI, FL 33160 US

Title: CFO (X) Change ( ) Addition  
Name: NAVARRO, CARMEN V CFO  
Address: PO BOX 601573  
City-St-Zip: MIAMI, FL 33160 US

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

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: CARMEN, NAVARRO

CFO

02/13/2008

Electronic Signature of Signing Officer or Director

Date