

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 10, 2008 8:00 am
Secretary of State

07-10-2008 90016 011 ***150.00

40110159



07032008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0960409

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SLOTO, JAMES R ESQ
SLOTO & ASSOCIATES, P.L.
200 S BISCAYNE BLVD #3000
MIAMI, FL 33131

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	NAISTAT, ROBERTO
STREET ADDRESS	200 S BISCAYNE BLVD STE 3000 3000
CITY-ST-ZIP	MIAMI, FL 33131

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, written or other like empowered

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone: _____

(305) 610-6022

SLOTO & ASSOCIATES, P.L.

LAW OFFICES

WACHOVIA FINANCIAL CENTER - SUITE 3000
200 SOUTH BISCAYNE BOULEVARD
MIAMI, FLORIDA 33131-2305

ATTACHMENT
40126159

JAMES R. SLOTO, ESQ.
jsloto@slotolaw.com

TELEPHONE 305-379-1792
FACSIMILE 305-379-2328

July 7, 2008

Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314

Re: MB Blueway, Inc. (Document No. P99000096160)

Dear Sir or Madam:

Enclosed please see our 2008 Annual Report for MB Blueway, Inc. Also enclosed is Northern Trust Check No. 1274 in the amount of \$150.00 for the required filing fees.

If you require further information, please contact our office.

Thank you.

Yours truly,



Cathleen Plasencia