2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V35204

FILED Aug 12, 2007 Secretary of State

Entity Name: M. NEIGHBORHOOD INVESTMENT CORPORATION

Current Principal Place of Business:		New Principal Place of Business:		
1877 NW : MIAMI, FL				
Current Mailing Address:		New Mailing Address:		
1877 NW : MIAMI, FL				
FEI Number	: 65-0337249	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
	SCHOOP, C. M / 2ND AVE # 2: 33169 US			
The above	named entity	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,
	e of Florida.			
n the State	RE:	nic Signature of Registered Ago	ent	Date
n the State SIGNATUI n accordan	RE: Electror	nic Signature of Registered Ago 3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().		Date
n the State SIGNATUE n accordan Election Cae	RE: Electror	3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.	Date GES TO OFFICERS AND DIRECTOR:
n the State SIGNATUE n accordan Election Cae	RE: Electron see with s. 607.19 mpaign Financing S AND DIREC	3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). TORS: Delete NY A.,	ot receive the prior notice.	
n the State SIGNATUI n accordan Election Car OFFICER Fitle: Name: Address:	Electron Ce with s. 607.19 Impaign Financing S AND DIREC P MOSS, ANTHO 1877 NW 57 S MIAMI, FL 331	3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). TORS:) Delete NY A., I 42) Delete NY A	ot receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTOR
n the State BIGNATUI n accordan Election Can OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electron Electr	3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). TORS: Delete NY A., Delete NY A Delete NY A	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	GES TO OFFICERS AND DIRECTOR:

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: ANTHONY MOSS P 08/12/2007