## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # V41795**

MAS ORFUS, INC.

Be profession



**FILED** Feb 26, 2007 08:00 A **Secretary of State** 

Principal Place of Business 2699 STIRLING ROAD SUITE C-307 FT. LAUDERDALE, FL 33312 Mailing Address 2699 STIRLING ROAD SUITE C-307 FT. LAUDERDALE, FL 33312



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

4. FEI Number Applied For 65-0343621 Not Applicable \$8.75 Additional 

5. Certificate of Status Desired

01092007

Fee Required

CR2E034 (11/05)

BLEIER, HENRY 2699 STIRLING ROAD SUITE C-307 FT, LAUDERDALE, FL 33312

changed, or on an attachment with

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

No Chg-P

<ol> <li>Ine above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. Tarmamiliar with, and accept the obligations of registered agent.</li> </ol>						
SIGNATURE				e required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.			~ —	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
NAME STREET ADDRESS CITY-ST-ZIP	DS ORFUS, YETTA 1020 LAWRENCE AVE., W. TORONTO, CANADA,			U00000648097 03/06/07-80099-006 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ORFUS, YETTA 1020 LAWRENCE AVE., W. TORONTO, CANADA,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DRFUS, HOWARD 1020 LAWRENCE AVENUE FORONTO, CA			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. Thereby 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 period 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 pusces in Block 10 or Block 11 if						

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR