

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000052936

**Entity Name:** M.F.A. CORPORATION

**Current Principal Place of Business:**

1835 E HALLANDALE BEACH BLVD.  
# 418  
HALLANDALE, FL 33009

**Current Mailing Address:**

1835 E HALLANDALE BEACH BLVD.  
# 418  
HALLANDALE, FL 33009

**FEI Number:** 65-1018206

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MIHLSTIN, ANNETTE VSTD  
1225 HARRISON ST  
HOLLYWOOD, FL 33019 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name MIHLSTIN, MICHAL G  
Address 1225 HARRISON STREET  
City-State-Zip: HOLLYWOOD FL 33019

Title VD  
Name MIHLSTIN, FRANKLIN D  
Address 1225 HARRISON STREET  
City-State-Zip: HOLLYWOOD FL 33019

Title VSTD  
Name MIHLSTIN, ANNETTE  
Address 1225 HARRISON STREET  
City-State-Zip: HOLLYWOOD FL 33019

*I hereby 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 all other like empowered.*

**SIGNATURE:** ANNETTE MIHLSTIN

VSTD

04/06/2015

Electronic Signature of Signing Officer/Director Detail

Date