

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000006754

**Entity Name:** MB FLORIDA HOLDINGS, INC.

**Current Principal Place of Business:**

4835 COLLINS AVENUE  
SUITE 801  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

PO BOX 140668  
CORAL GABLES, FL 33114

**FEI Number:** 65-0449175

**Certificate of Status Desired:** No

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

MJF REGISTERED AGENT CORP.  
153 SEVILLA AVENUE  
CORAL GABLES, FL 33134 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 D, P  
Name MURRAY , JEAN- JACQUES  
Address 11AVENUE DE LA PRINCESSE GRACE  
APT 32  
City-State-Zip: MONACO 98000

Title S  
Name SIMMONDS, JOEL  
Address 9418 COLLINS AVENUE  
City-State-Zip: SURFSIDE FL 33154

Title D  
Name MURRAY, JEAN-PIERRE  
Address 2314 FISHER ISLAND DRIVE  
City-State-Zip: FISHER ISLAND FL 33109

Title D  
Name LEON, MARIE- CLAIRE  
Address 1017 BEVERLY DRIVE  
City-State-Zip: BEVERLY HILLS CA 90210

Title D  
Name MIGNOLET, XAVIER  
Address INDUSTRIALAAN 35  
City-State-Zip: GROOT BIJGAARDEN 1702

*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:** SIMMONDS , JOEL

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02/20/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date