

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000033581

FILED  
Mar 31, 2009  
Secretary of State

Entity Name: RANGE.MBS, INC.

## Current Principal Place of Business:

3361 SW 3 AVE  
MIAMI, FL 33145

## New Principal Place of Business:

## Current Mailing Address:

255 GALEN DRIVE  
APT #4I  
KEY BISCAYNE, FL 33149

## New Mailing Address:

PO BOX 3033  
REDMOND, WA 98073

FEI Number: 20-8648620      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

RANGEL-OLIVEIRA, CLAUDIO  
255 GALEN DR  
APT#4I  
KEY BISCAYNE, FL 33149 US

## Name and Address of New Registered Agent:

RANGEL OLIVEIRA, CLAUDIO  
600 GRAPETREE DR  
APT#7FN  
KEY BISCAYNE, FL 33149 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: CLAUDIO RANGEL

03/31/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: RANGEL OLIVEIRA, CLAUDIO  
Address: 255 GALEN AVE #4I  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VP/D ( ) Delete  
Name: RANGEL DE OLIVEIRA, AUDREY  
Address: 255 GALEN AVE #4I  
City-St-Zip: KEY BISCAYNE, FL 33149

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: RANGEL OLIVEIRA, CLAUDIO  
Address: 600 GRAPETREE DR # 7FN  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VP/D (X) Change ( ) Addition  
Name: RANGEL DE OLIVEIRA, AUDREY  
Address: 6416 E LAKE SAMMAMISH PKWY NE #312  
City-St-Zip: REDMOND, WA 98052

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: CLAUDIO RANGEL

P/D

03/31/2009

Electronic Signature of Signing Officer or Director

Date