


2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L29947 1. Entity Name MIAMI EXPORT, INC.	
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FILED
05 MAR 28 PM 2:18
STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 2300 CORAL WAY SUITE 200 MIAMI, FL 33145	Mailing Address 2300 CORAL WAY SUITE 200 MIAMI, FL 33145
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DO NOT WRITE IN THIS SPACE

02092006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0174927	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

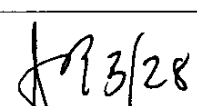
FLORIDA ANNUAL REPORT SERVICES INC.
2300 CORAL WAY
SUITE 200
MIAMI, FL 33145

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	ZACROISKY, BERTA
STREET ADDRESS	5660 COLLINS AVE., #21C
CITY-ST-ZIP	MIAMI BEACH, FL
TITLE	STD
NAME	PICHON, DIANA
STREET ADDRESS	20425 NE 19TH CT
CITY-ST-ZIP	MIAMI, FL 33179
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

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12. I hereby 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 report 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: BERTA ZACROISKY Berta Zacroisky (Pres.) Date: 2-10-06 Daytime Phone #: 305-85

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR