

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90039 043 ***150.00

DOCUMENT # L96751 1. Entity Name MIT PRODUCTS & SERVICE, INC.					
Principal Place of Business 3399 NW 72ND AVE STE 200 A MIAMI, FL 33122 US			Mailing Address 3399 NW 72ND AVE STE 200 A MIAMI, FL 33122 US		
2. Principal Place of Business 12605 NW 7 STREET Suite, Apt. #, etc.		3. Mailing Address 12605 NW 7 STREET Suite, Apt. #, etc.			
City & State MIAMI, FL. Zip 33182		City & State MIAMI, FL. Zip 33182		4. FEI Number 65-0212912 Applied For ☐ Not Applicable	
Country USA		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent YELISSA CASTELLO FERNANDEZ 12605 N.W. 7TH ST MIAMI, FL 33182			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ Signature, typed or printed name of registered agent and title if applicable.					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS YELISSA CASTELLO FERNANDEZ 12605 N.W. 7TH ST MIAMI, FL ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAFAEL A MOREL 12605 N.W. 7TH ST MIAMI, FL ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MELISSA B MOREL 12605 N.W. 7TH ST MIAMI, FL ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOREL, JUAN J. 12605 NW 7TH STREET MIAMI, FL ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Yelissa Castello Fernandez</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			YELISSA CASTELLO FERNANDEZ, President 4/15/04 (305) 226-2627 Date Daytime Phone #		

94058507



04152004 Chg-P CR2E034 (10/03)