

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004964

Entity Name: MIAMI TUX, INC.

FILED
Mar 19, 2007
Secretary of State

Current Principal Place of Business:

9487 SOUTH DIXIE HWY
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

9487 SOUTH DIXIE HWY
MIAMI, FL 33156

New Mailing Address:

FEI Number: 74-3075857

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUSZ, JOHN W
9487 SOUTH DIXIE HWY
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NUSZ, JOHN W
Address: 8914 SW 150 PL CIR
City-St-Zip: MIAMI, FL 33196

Title: D () Delete
Name: DESME, HUGO
Address: 15894 KILMARNOCK DR.
City-St-Zip: MIAMI, FL 33014

Title: D () Delete
Name: DESME, JORGE
Address: 13101 SW 85TH ST.
City-St-Zip: MIAMI, FL 33183

Title: D () Delete
Name: DESME, CARLOS
Address: 3667 SOUTH MIAMI AVE., APT. 144
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: NUSZ, REBECA
Address: 18703 SW 93RD CT.
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: NUSZ, JOHN W
Address: 3836 SW 137 AVE
City-St-Zip: MIAMI, FL 33175

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: NUSZ, REBECA
Address: 3836 SW 137 AVE
City-St-Zip: MIAMI, FL 33175

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN W. NUSZ

Electronic Signature of Signing Officer or Director

PRES

03/19/2007

_____ Date