


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 08:00 A
Secretary of State

DOCUMENT # P03000047874

1. Entity Name
MIA INVESTMENTS INC.



Principal Place of Business Mailing Address

20001 N.W. 78 CT. 20001 N.W. 78 CT.
 MIAMI, FL 33015 MIAMI, FL 33015

DO NOT WRITE IN THIS SPACE



04042007 No Chg-P CR2E034 (11/05)

4: FEI Number 65-1193123	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

IRIARTE, JULIO R
 20001 N.W. 78 CT.
 MIAMI, FL 33015

DO NOT WRITE IN THIS SPACE

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, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD VACA, MILLER G 20001 N.W. 78 CT. MIAMI, FL 33015
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD IRIARTE, JULIO R 20001 N.W. 78 CT. MIAMI, FL 33015
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00000755272
 05/22/07-80086-023 150.00

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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:  _____ **4/26/07** _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #