

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000161589

FILED
Jul 26, 2007
Secretary of State

Entity Name: MIAMI INNOVA SERVICES, CORP.

Current Principal Place of Business:

1838 NW 22 CT. #5
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

1838 NW 22 CT. #5
MIAMI, FL 33125

New Mailing Address:

FEI Number: 20-1954626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARDENAS, HOWARD G
1838 NW 22 CT. #5
MIAMI, FL 33125 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARDENAS, HOWARD G
Address: 1838 NW 22 CT. #5
City-St-Zip: MIAMI, FL 33125

Title: VP () Delete
Name: TORRES DE CARDENAS, GLADYS M
Address: 1838 NW 22 CT. #5
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: HOWARD CARDENAS

P

07/26/2007

Electronic Signature of Signing Officer or Director

_____ Date