


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

8/29/2006-90003-001-\$150.00-\$150.00

112

**DOCUMENT # P0500087309**

1. Entity Name  
MIDTOWN-MIAMI ACQUISITIONS, INC.



**FILED**  
06 SEP 25 PM 3:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
20401 NE 30 AVENUE #312 20401 NE 30 AVENUE #312  
AVENTURA, FL 33180 AVENTURA, FL 33180



2. Principal Place of Business 3. Mailing Address  
*Same As Above*

Suite, Apt. #, etc. Suite, Apt. #, etc.

08242006 Chg-P CR2E034 (11/05)

City & State City & State

Zip Country Zip Country

4. FEI Number  
**59-380-9970**

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEL RISCO, MONICA  
20401 NE 30 AVENUE #312  
AVENTURA, FL 33180

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when remaining)

**FILE NOW!! FEE IS \$150.00 Due by September 8, 2006**

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

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

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEL RISCO, MONICA 20401 NE 30 AVENUE #312 AVENTURA, FL 33180	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST RODRIGUEZ, LUCY 11742 SW 14 STREET MIAMI, FL 33055	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Monica Del Risco* *Lucy Rodriguez* *8/24/2006*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40402050  
# P05000087309

8/29/06 2/2

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To whom IT MAY CONCERN:

In April 18, 2006 I Mailed my ANNUAL Report with a check for the amount of \$150.00 - but apparently either the envelope got lost in the mail or? I don't know what happened.

Enclosed please find another check for that amount and the annual report.

If you have additional questions regarding this matter please do NOT hesitate to contact me.

Thank you.

Monica Del Risco

786 489-0710 Cel  
305 931-1437 Home

monicadelrisco@aol.com