

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

**Feb 10 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000068070 (8)
1. Corporation Name
MIA CONSULTING GROUP, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 5208 ALTON ROAD MIAMI BEACH FL 33140
Mailing Address: 5208 ALTON ROAD MIAMI BEACH FL 33140

3. Date Incorporated or Qualified: **09/01/1995**

2. Principal Place of Business
21 **1200 S. ALHAMBRA CIR.**
Suite, Apt. #, etc.
22 City & State
23 Zip **33146-3105** Country **U.S.A.**

2a. Mailing Address
26 **1800 S. ALHAMBRA CIRCLE**
Suite, Apt. #, etc.
27 City & State
28 **CORAL GABLES, FL**
Zip **33146-3105** Country **U.S.A.**

4. FEI Number: **65-0618537** Applied For: Not Applicable:
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**MIDSTATE LEGAL SUPPLY CORP.
4433 OLD WINTER GARDEN RD.
ORLANDO FL 32811**

10. Name and Address of New Registered Agent
81 Name: **MARIA RITA de la Portilla, Esq**
82 Street Address (P.O. Box Number is Not Acceptable): **420 S. DIXIE HIGHWAY**
83 **Ste. 4B**
84 City: **CORAL GABLES** FL 85 Zip Code: **33146**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
Signature typed or printed name of reg. agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAMIREZ, JOSEFINA R	1.2 NAME	
STREET ADDRESS	5208 ALTON ROAD	1.3 STREET ADDRESS	1200 S. ALHAMBRA CIRCLE
CITY-ST-ZIP	MIAMI BEACH FL 33140	1.4 CITY-ST-ZIP	CORAL GABLES, FLA 33146
TITLE	P	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRETOS, CONCEPCION T	2.2 NAME	
STREET ADDRESS	5208 ALTON ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL 33140	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERNANDEZ, GEMA	3.2 NAME	
STREET ADDRESS	5208 ALTON ROAD	3.3 STREET ADDRESS	Delete
CITY-ST-ZIP	MIAMI BEACH FL 33140	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13, if changed, or as an attachment with an address.

SIGNATURE:  **JOSEFINA R. RAMIREZ, V. PRES 2/5/98 305 666-1261**

CR2E034 (10/97)