2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 11, 2006 08:00 AM Secretary of State

ANNUAL REPORT		Secretary of State
DOCUMENT # V45363 1. Entity Name MIAMI MODAS INC.		Secretary of State
Principal Place of Business Mailing Address 9590 S.W. 40TH ST. 9590 S.W. 40TH ST. MIAMI, FL 33165 MIAMI, FL 33165		
DO NOT WRITE IN THIS SPA	.CE	01192006 No Chg-P CR2E034 (11/05) 4. FEt Number Applied Far 65-0343272 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
MIRANDA, EDGAR 3811 SOUTHWEST 99TH AVENUE APT. 4 MIAMI, FL 33165		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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relinatating) OATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees		
TITLE PST NAME MIRANDA, EDGAR STREET ADDRESS 9590 S.W. 40TH ST. CITY-ST-ZIP MIAMI, FL 33165 TITLE NAME STREET ADDRESS		U80000502735 04/26/06-80002-003 150.0
CTY-ST-ZIP TITLE NAME SURCET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
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12. I hereby certify that the information supplied with this filling does not quality that he 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 properties or the tree or trusted ampowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter an attachment with an address, with all the backs ampowered.		