


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2007 08:00 AM
Secretary of State

DOCUMENT # 249374	
1. Entity Name MIAMI CLUTCH SERVICE INCORPORATED	

Principal Place of Business 111 N.W. 20TH ST. MIAMI, FL 33127-4829	Mailing Address 111 N.W. 20TH ST. MIAMI, FL 33127-4829
--	--

DO NOT WRITE IN THIS SPACE



02052007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0938358	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 CRUZ, BENITO 111 NW 20 STREET MIAMI, FL 33127	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 _____
-----------------	--	------------

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP. CRUZ, BENITO 1636 SW 14 ST MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TR. CRUZ, MARTA 1636 SW 14 ST MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD CRUZ, JULIO 1259 SW 17TH ST MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

UN00000640519
02/28/07-80069-013 150.00

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:  BENITO CRUZ	Date: 02/14/07	Daytime Phone: 305-573-6067
---	-----------------------	------------------------------------