

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 398838

FILED  
Apr 15, 2011  
Secretary of State

Entity Name: MIAMI TRANSMISSION, INC

**Current Principal Place of Business:**

3740 N.W. SOUTH RIVER DRIVE  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

3740 N.W. SOUTH RIVER DRIVE  
MIAMI, FL 33142

**New Mailing Address:**

FEI Number: 59-1433352

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DURAN & ASSOCIATES, P.A.  
5511 SW 8TH STREET  
202  
MIAMI, FL 33134 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MUNNE, JUAN C  
Address: 3740 N.W. SOUTH RIVER DRIVE  
City-St-Zip: MIAMI, FL 33142

Title: VP  
Name: MUNNE, JUAN C  
Address: 3740 N.W. SOUTH RIVER DRIVE  
City-St-Zip: MIAMI, FL 33142

Title: T  
Name: MUNNE, JUAN C  
Address: 3740 N.W. SOUTH RIVER DRIVE  
City-St-Zip: MIAMI, FL 33142

I hereby 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 all other like empowered.

SIGNATURE: JUAN C. MUNNE

PRES

04/15/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date