

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # 406803

1. Entity Name
MIAMI EASY LIVING MOBILE HOMES, INC.



Principal Place of Business
**12808 SW 8 ST.
MIAMI, FL 33184**

Mailing Address
**12808 SW 8 ST.
MIAMI, FL 33184**



01182008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1430372

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ARENA, PHILLIP S
12808 SW 8 ST
MIAMI, FL 33184**

**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 re-registering)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS .

TITLE PD
NAME ARENA, PHILLIP S
STREET ADDRESS 8994 SW 59 COURT
CITY-ST-ZIP COOPER CITY, FL 33328

TITLE S
NAME ARENA, PHILLIP P
STREET ADDRESS 12808 SW 8 ST.
CITY-ST-ZIP MIAMI, FL 33184

TITLE VP
NAME ARENA, ROSEMARY D
STREET ADDRESS 8994 SW 59 CT
CITY-ST-ZIP COOPER CITY, FL 33328

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000815969
02/14/08-80030-016 150.00

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PHILLIP S ARENA

1/18/08

Date

805-491-2927

Daytime Phone #