

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 408928

FILED  
Mar 08, 2009  
Secretary of State

Entity Name: MIAMI BEEF COMPANY, INC.

**Current Principal Place of Business:**

4870 NW 157TH STREET  
MIAMI, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

4870 NW 157TH STREET  
MIAMI, FL 33014

**New Mailing Address:**

FEI Number: 59-1455083

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

YOUNG, MIKE  
4870 NW 157TH ST  
MIAMI, FL 33014 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: YOUNG, MICHAEL  
Address: 4870 NW 157TH ST  
City-St-Zip: MIAMI, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: YOUNG, MICHAEL  
Address: 4870 NW 157TH ST  
City-St-Zip: MIAMI, FL 33014

Title: VPD ( ) Change (X) Addition  
Name: YOUNG, ELIZABETH  
Address: 4870 NW 157 ST  
City-St-Zip: MIAMI, FL 33014

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MICHAEL YOUNG

PD

03/08/2009

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

\_\_\_\_\_  
Date