


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

3 **FILED**  
**Apr 18, 2005 8:00 am**  
**Secretary of State**

03-22-2005 90008 028 \*\*\*115.00  
04-18-2005 90291 019 \*\*\*\*35.00

|   |   |
|---|---|
| <b>DOCUMENT # 447964</b><br>1. Entity Name<br><b>MIAMI PRESTIGE INTERIORS, INC.</b> |  |
|---|---|

|  |  |
|--|--|
| Principal Place of Business<br>4798 E. 10TH LANE<br>HIALEAH, FL 33013-2126 | Mailing Address<br>4798 E. 10TH LANE<br>HIALEAH, FL 33013-2126 |
|--|--|

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02242005 No Chg-P CR2E034 (10/03)

|                                    |  |
|------------------------------------|--|
| 4. FEI Number<br><b>59-1538559</b> | Applied For<br><input type="checkbox"/> Not Applicable |
|------------------------------------|--|

|   |                                       |
|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |
|---|---------------------------------------|

6. Name and Address of Current Registered Agent

DE LA ROSA, RICHARD  
13046 NW 14 ST.  
PEMBROKE PINES, FL 33028

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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]*

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

*3/15/05*  
DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

|  |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PD<br>DE LA ROSA, ROGELIO<br>5680 SW 85TH ST.<br>MIAMI, FL               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | SD<br>DE LA ROSA, AURORA<br>5680 SW 85TH ST.<br>MIAMI, FL                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>DE LA ROSA, RICHARD<br>13046 NW 14 ST.<br>PEMBROKE PINES, FL 33028 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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:

*Aurora de la Rosa* (Aurora de la Rosa) *4/12/05* 305 685 3343

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #